

MEDICAL ECONOMICS

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The
BUSINESS
MAGAZINE
of the
MEDICAL
PROFESSION

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MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

FEBRUARY, 1931 <> VOL. 8, No. 5

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MEDICAL ECONOMICS: Published at RUTHERFORD, N. J.
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The beneficial effects of physical therapy in the rheumatic group of diseases are due mainly to influence on circulation particularly on the capillary beds.

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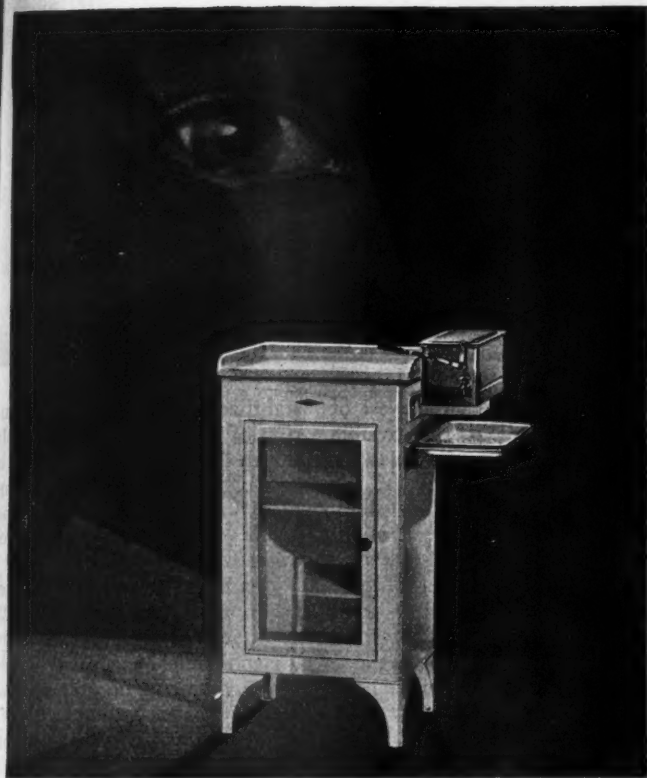
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They were the doughty men -the Walshes, Keoghs, and Cahills

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February, 1931

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Speaking Frankly

Books

TO THE EDITOR:

In the December issue of *MEDICAL ECONOMICS*, under "Speaking Frankly," there is a letter from a medical student asking for books. I have none of my medical books with me, and since he may not receive just what he needs in his line, I am enclosing a check with the request that he be allowed to select the kind of a book he most needs.

Will you convey to him my very sincere wishes that his release be speeded up by his present industry, and that he be restored to his normal useful capacity in life without bitterness.

I, too, knew what it was to be a medical student when "the going was rough." E. L. H.

Druggist

TO THE EDITOR:

I was interested in Dean C. B. Jordan's article, "Pharmacy Deserves Your Confidence," which appeared in December *MEDICAL ECONOMICS*, and in his quotation from Dr. W. W. Charters, which states: "The pharmacists are therefore more strategically situated than any other group of individuals to give personal advice upon matters of health on which they are informed. The information is given free of charge, etc. . . ."

My opinion on this quotation is simply this: "The free advice is worth exactly what you pay."

I wish to mention the following incident which took place about two weeks ago to illustrate my point. One afternoon I happened to step into my neighborhood drug store, which fills my prescriptions, and had the privilege of overhearing the following tele-

phone conversation, "Well, you give the medicine I gave you, . . . yes, give the castor oil first and if the pains continue put a hot water bottle over his abdomen."

When he was through I said to him, "You forgot one final advice, that is if the pains increase in intensity and abdomen swells up, call in the undertaker."

I happened to know that this man had only six months' night course in a neighborhood pharmacy school, now extinct. Well, yes, he is strategically situated, but there his qualifications end.

Dean Jordan advises cooperation, but I think he should write that advice in the *Journal of Pharmacy*, because the druggists do "cooperate" with us to the extent of advising the public the foolishness of calling a doctor and paying a fee. The other day a patient of mine who is the district manager of a life insurance company informed me of a downtown druggist's very considerate advice when he presented him my prescription, namely: "If you had come here first this medicine would not have cost you so much."

These incidents are not exceptions but everyday occurrences. My neighborhood druggist has repeatedly informed me the necessity of charging a few times more for a medicine on a prescription than if the patient had called for it by name, or the medicine was prescribed by the druggist himself, thereby discouraging the public to seek medical advice for their physical complaints.

It is very gratifying indeed to see the A. & P. and Kroger's stores gradually selling more and more patent medicines in competition with the druggists, because this will force the pharmacists to seek medical cooperation and be what they are supposed to be, Ph. G.'s, not M. D.'s!

James K. Sutherland, M. D.

[Will the physician who offered to send "H. L." copies of Pathology and Morbid Anatomy, Clinical Examination of the Blood, Pathological Histology, and Text Book Pathogenic Bacteria, please communicate with the editor again?]

Course

TO THE EDITOR:

You have a splendid magazine in many ways, a great help to the general practitioner. I wish I had had it twenty-five years ago. I think a business course should be added to every medical college curriculum.

James F. Wood, M. D.

Welfare

TO THE EDITOR:

I am sorry that my reply card for the income survey has been badly crumpled. You should be not only congratulated but thanked for the interest you are taking in the economic welfare of the profession.

I hope that some day soon MEDICAL ECONOMICS will turn the spotlight on the "compensation specialists, clinics, charities and other unfair competition."

A. F. S.

Inconsistent

TO THE EDITOR:

From time to time there have appeared in your magazine articles regarding the socializing and paternalising of medicine by state and communities. I quite agree with all that you have said against this encroachment.

But it is rather interesting to see how inconsistent we physicians are. Many of those with whom I have spoken are against state encroachment on medicine, but they are quite willing that the state should encroach into other fields, believing, for example, that a man who has an occupational accident should be allowed to choose his own physician. Since the concern pays the bills, I wonder why some physicians think they should not be allowed to select the physician they want.

Further than this, public utilities are a highly specialized field. Why then should doctors advo-

cate government ownership of public utilities? Simply because they think their monthly electric light bill will be less. Hasn't the patient the same idea when he goes to a public clinic, namely, that his doctor's bill will be less?

I might go a great deal further but I do not want to take too much valuable space.

Christian P. Segard, M. D.

(Not in practice)

Hospitals

TO THE EDITOR:

There are two articles in the December number of MEDICAL ECONOMICS which I cannot resist making some comments on. There is so much truth in these two articles that I sincerely believe they should be published in every medical magazine and bulletin in the country. This, of course, would not be possible, first because these articles would not be entirely appetizing to some of the officials of larger medical publications, and, secondly, they are too practical for publication. They might start some of us general practitioners to thinking for ourselves, and that is something we mustn't under any circumstances do.

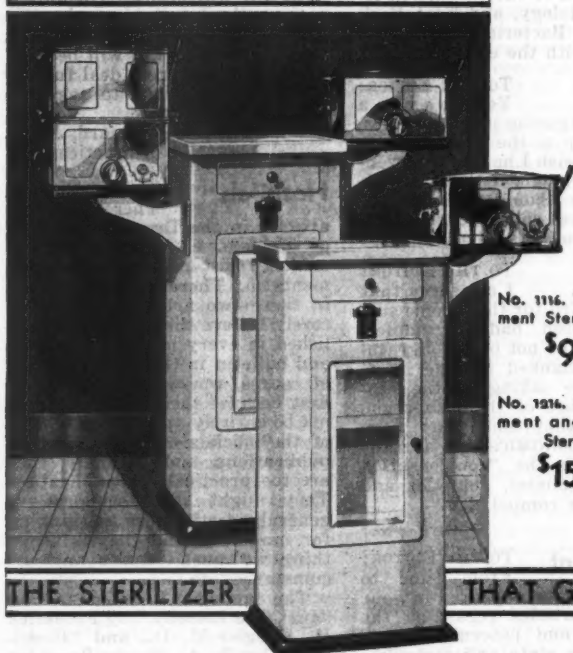
The articles I refer to are "Just One Remedy," by Frederick H. Kuegle, M. D., and "Hospitals," by B. A. M., in *Speaking Frankly*.

In the first article, "Just One Remedy," the author asks a very important question: "How can this menace be met and conquered?" This is one question I believe that MEDICAL ECONOMICS could publish several articles of intense interest and value about, in just telling us how to solve the problem embodied in that one question.

After all, if that one question were answered and the problem solved in a proper way, we will be saved from State Medicine, or, to quote the author's words "Saved from sinking to the obsequious level of European physicians."

I believe that nowhere do we realize the [TURN TO PAGE 77]

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MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

Advertising Health

By EARNEST ELMO CALKINS
DEAN OF ADVERTISING MEN

DOCTORS lose a good deal by not being business men. They waste themselves and their time. They are tied down too closely.

The practice of medicine is not keeping up with the advantages of organization as developed in other lines, and one of the first steps towards improvement is better cooperation, and this cooperation could be brought about among other things by cooperative advertising.

I have always believed in the idea that doctors would some day advertise, and long ago sketched out in my mind how they should go about it. Collective advertising by the medical profession could be made one of the greatest benefits to the public health of anything yet conceived. Such advertising should be directed to establishing relations between all the people and reliable doctors for the general supervision of health; people should be taught not to wait until the last moment before taking medical advice but to keep in touch with a good physician with the idea of keeping well.

Of course the advertising that

doctors do must be unselfish, and devoted entirely to the value and importance of health and means of preserving it, and especially the necessity of having a family doctor to consult with and his importance in the scheme of things. Also I think such advertising should warn against self-medication, and if possible direct these warnings specifically against the great number of dishonest, fraudulent and misleading patent medicines.

I believe that the next great step in medicine, and also dentistry, is going to be the development of preventive methods, teaching people how to keep well rather than how to be cured, how to keep their teeth rather than how to have them replaced, and the chief income of doctors and dentists will come, not from curing disease, but from preventing it.

The medical profession should join with the life insurance companies, especially the Metropolitan, in making life more worth living. Nothing is so important as health, as any man who has reached my years knows only too well.

The Mid-Ground between

OUR PURPOSES ARE MUTUAL



Photo by Ewing Galloway

MODERN dentistry is human enough to be proud, but sane enough to be contrite. It is proud of the position it occupies among the other workers engaged in the healing arts. Its accomplishments, directed toward the goal of the maintenance of good health, are universally acknowledged.

Dentistry is proud also of the close relationship and association with the members of its sister profession, Medicine.

Dentistry is contrite that it knows so little. There is much to be learned on both sides, for we are both so hopelessly interdependent; our mutual objective in the maintenance of the public's good health. This goal can be reached and realized more intelligently, more quickly and more surely only through closer cooperation, each profession courteously remembering the fact of its inter-dependence, and each "Rendering unto Caesar the things that are Caesar's"—we may as well continue "and unto God the things that are God's."

For someone has said that it has taken the medical profession many years to learn that the human animal has a soul, and about as long also for the theologians to learn that he possesses a body. Medicine and dentistry have been in an analogous position with reference to local and general conditions, each ignoring the far reaching influences of the other's field. And while spiritual things may be most important, the fact remains that material ones are more pressing, and they seem to demand our attention first and foremost.

The procedures in dentistry are

Medicine and Dentistry

By GOODMAN A. MILLER, D.D.S.

to most of our patients very material and not at all conducive to spiritual quietude, though the eventual relief from pain surely has a calming influence on the spirits and allows one to get back into a train of rational thought.

Dentistry has done its share of sane thinking, and in spite of its humble beginning has advanced and made enormous strides forward, even though the "barber has kept on shaving."

Philosophers have told us that when the student is ready the teacher will appear.

Students from the ranks of general dentistry, realizing that there was a middle ground between the two professions and that this ground was being ignored, voluntarily enrolled in quest of pertinent facts bearing on this neglected field. They sought the teachers, and as they studied under them they found that the quest had not only taught them facts relative to this special sphere, but had in addition led them far afield into the highways and byways adjacent. They were forced to become students in Physiology, Chemistry, Anatomy, Histology, Anaesthesia, Dietetics, Radiography, Heliotherapy, Photography, Bacteriology, Therapeutics, Regional Surgery and so on, ad infinitum, in order to be qualified to arrive at the desired goal, correct diagnosis.

Their positions and field of endeavor may be aptly likened to the phenomenon which occurs when a stone is cast into a body of still water, beginning at the small point of attack the effects are a series [TURN TO PAGE 103]



By E. L. WORTH, M.D.

Pues, Doctor-TH cito



PHYSICIANS are like most other men in one respect—there are times when they wish they had chosen some other occupation! It is so easy to see the high lights of interest in another man's job, and the difficulties of our own.

Here is a suggestion for any physician who may feel that his life is uninteresting and monotonous: let him pack his grip and go to Mexico. There he will find new scenes, novel experiences, and perhaps excitement.

Mexican laborers who have come to this country, are no longer fair examples of the unsophisticated *pelado*, for they have absorbed some new ideas or are over-awed by their surroundings. Any one who wishes to really understand the peon, or to know his quaint ideas and naive opinions, must see him among his native mountains or in some out-of-the-way village where he has encountered few strangers.

A physician living among them in such a locality has unique op-

portunities for observation, and an account of his experiences may throw a spot light on the mental processes of the peons and their mode of life.

The Madero Administration was new and Orosco was just beginning to make things interesting in the North, when I was practicing medicine among the workers of a mine. The mining camp was situated upon the desert highlands, and it is probable that there had never been a physician in that district. At least, the arrival of one created as much interest as would a circus parade.

My predecessor had been so much frightened by the reports of revolution that he had remained only two weeks, during which time he had slept in his shoes in order to be ready to escape at any time. On taking over the position after he had gone, the only drug on hand was a quantity of cough syrup, and this had to be given to all who applied for treatment. It made a decided hit and the demand for medicine assumed the proportions of a run on a bank. As soon as other drugs were obtained, castor oil and a solution of salts were substituted for the syrup, and my popularity ceased abruptly.

The people who lived in the vicinity of the mine were poor and had few materials from which to build homes for themselves. They had evolved two

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sorts of habitations in the effort to adapt themselves to their surroundings, both very crude, but the best they could do under the circumstances.

Many families lived in cuevos or caves, dug out of the hard dry dirt at the side of an arroyo. The entrance was often so low that one had to crawl in on hands and knees. The cuevo itself might be eight feet square, simply a cavern in the hard-packed earth, serving as the home of an entire family. The interior is dark and stuffy. Even in those cuevos which happened to have a window opening, this would be carefully covered by a blanket when the doctor came, for these people had been brought up to believe that fresh air is extremely dangerous to a sick person.

When the doctor arrives for a visit at a cuevo, he enters by stooping low, or perhaps he has to crawl. He is followed through the entrance by as many of the neighbors as can find room in the cave, for *el medico* is an interesting innovation and they want to know all that he does and says. He will find the patient lying on some blankets on the floor. Any examination which he considers necessary must be made under difficulties, in the dim light, while some one holds a blanket solicitously between the patient and the entrance of the cave to ward off danger of any possible breath of fresh air.

When he is ready to leave, some one else will suddenly realize that he, too, has a *dolor*—a pain. It is such a thrilling experience to talk to the doctor and to have some medicine to take, that one



When practice becomes monotonous, says the author, try traveling like this.

stricken with an imaginary ailment—always a *dolor*. I once heard a peon remark that he had person after another is suddenly a "most affectionate feeling for those pills."

These people probably have no racial connection with the ancient cliff-dwellers, but when one has followed a ledge along the side of a deep arroyo, and has crawled into the low entrances of the cuevos, he is quite ready to believe that these people are direct descendants who have made little



These are cuevos, and people live in them. Below is a picture of the jacale type of habitation.

progress since pre-historic times.

Another sort of dwelling which is used in the highlands is made of slabs and leaves of the desert palm. These huts are called *jacales* (*ha-ka-les*), and are very carelessly constructed. Fortunately it is a dry climate and the walls and roof do not need to be really weather-proof—or perhaps it does not occur to them to do anything about it.

That failure to think of remedies for their bad conditions is one of the outstanding characteristics of the peons. They may realize that their surroundings are uncomfortable, but it does not seem to enter their minds that a little thought and effort would add to their happiness.

In one of the *jacales* there was a man ill with pneumonia. He was lying on the floor in an inch or so of water, the result of a recent rain. The first order I gave out was for someone to go find

some boards to place under the patient in order to raise him out of the mud.

The other members of the family were delighted and perfectly willing to follow the suggestion. They saw at once that this would make things more comfortable for the sick man, and that it was a reasonable thing to do. But until the idea was suggested, the thought had not occurred to them that something should be done. This peculiarity one will often notice. It is not so much that they cannot think, as it is an inability to start thinking until some one suggests an idea. One meets this condition again and again.

One night a father and mother brought their sick baby to my quarters. It was a cold night in winter, with almost a hint of frost in the air. The father was wrapped to the eyes in a heavy blanket; the mother had a warm shawl over her head and shoulders. But the baby was dressed only in starchy tarletan. Apparently it did not occur to the parents that the baby might be cold, although any one looking at it could easily see the little shivering body through the pink folds of the dress.

To remedy their difficulty was a simple matter. The mother was ordered to take off her shawl and wrap it about the baby; then I made the father give his blanket to the mother. [TURN TO PAGE 127]



Credit Wheels

By HAROLD S. STEVENS, MANAGING
EDITOR • MEDICAL ECONOMICS

THERE are now in the United States at least fifteen credit bureaus organized and operated by physicians. That means that the medical profession, or an important part of it, has not only admitted the necessity of organized credit, but has gone to work and built its own credit machinery.

There are some who say that doctors have no business meddling with such machinery. Leave that to credit men, they say. If your medical group feels that it needs the support of organized credit, join up with a local Merchants' Credit Bureau, or, if there is none, make an arrangement with a local, privately organized credit bureau.

But a discussion on this point is not the concern here. The official medical credit bureau idea is well established (I used the term "official" to designate those owned cooperatively by doctors) and such bureaus have proved that they can operate successfully, clearing the books and gladdening the hearts of all physicians who have the wisdom to use the service offered.

Probably sufficient medical groups in the country have been playing with the credit bureau idea seriously enough so that a description of one successful bureau's set of machinery will be useful.

It was my privilege some time ago to spend a day in the Physicians' Business Bureau, Inc., in Memphis, Tennessee, and to see the system by which very close to one million dollars worth of physicians' accounts have been

salvaged since the bureau's organization in 1919.

Several times during that day I had the recollection of having heard, in the dim and distant past, an expression to the effect that physicians, aren't, could never be, and shouldn't try to be, business men. And here I was seeing the contradiction. Here was an elaborate piece of business machinery functioning as smoothly as a dynamo, machinery set up and operated by a group of people who could not be business men!

Before going into a description of the system, here is the history:

The Physicians' Business Bureau, Inc., actually dates from an evening in 1919, when, at 9 P. M., a group of Memphis physicians sat down around a table and decided—

That of all men whose livelihood depends on the rendering of a professional service, the physician is in the most unsatisfactory position with respect to collections.

That usual, commercial methods of collecting could not be applied, with success, to medical accounts, because of the sensitivity of a doctor's practice to the effect of good-will; and that a collection system must be made to order to conserve, as far as possible, good-will.

That further experimentation with commercial collection agencies was out of the question, first, because of the danger of fraud, and second, because of the risk of losing patients by reason of the hard-boiled methods ordinarily used.

[TURN THE PAGE]

That they would organize their own collection bureau, and build a system to their own specifications.

They organized, as a corporation, and called it the Physicians' Business Bureau, Inc. The stockholders were members of the local medical society, but the bureau was to be established as a business concern, not as a branch of the society. The share unit was \$10, the capital \$2000.

The idea of creating a collection system adapted to their own needs lay dormant for two years, during which the Bureau affiliated with the local Retail Credit Men's Association and the Merchants' Credit Association, under a monthly dues arrangement. The results were unsatisfactory.

In April, 1922, the Bureau opened its own office. It employed a manager, a stenographer, and two collectors. Today the office staff includes eighteen people. As a business concern the Bureau has built itself a comfortable surplus of funds, though it has paid no dividends on stock. As a solution to the collection problems of its members, it has been an even more complete success.

During the last few years of operation, dentists and hospitals have been admitted into membership along with the physicians it was originally devised to serve. At first these were asked to pay \$25 entrance fee; today not even that is required, the Bureau being

self-sustaining on commissions earned.

Now to the system itself, the Bureau's collection machinery:

I have in front of me as I write this, twenty separate printed forms or form letters. These are the wheels of the credit machine, their cogs being so intermeshed that, with a sufficient amount of energy on the part of the Bureau's employees who keep the wheels revolving, overdue accounts will be put in at the hopper, and turned out at the other end, if at all possible, *paid*, with the least necessary amount of friction.

Let us pick up the account of Dr. Jones against John Doe and feed it into the hopper. This is what happens—

The Bureau receives from Dr. Jones a printed form which reads:

"Physicians' Business Bureau, Inc.: Below please find listed accounts for collection. Date of Account, Name of Debtor, Occupation, Address, Amount. [Under these heads are spaces for listing fifteen accounts, space being provided for both a residence and a business address for each account.] Total. Thanking you to give these accounts your prompt attention. Dr. Jones."

The report blank itself is dated and numbered.

On the same day the blank is received by the Bureau, the following takes place:

A clerk looks through the Bureau's directories for any information to be found there concerning John Doe. A written acknow-



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ledgement of receipt of the account is sent to Dr. Jones, a carbon copy of the acknowledgement being kept by the Bureau.

The account that John Doe owes Dr. Jones is entered on a ledger card, upon which a full history of the account will be recorded as it progresses through the collection mill.

The account is also recorded on a blank collector's card, which is filed in a drawer assigned to the collector covering the district in which John Doe lives.

So far three records have been made—the carbon of the written acknowledgement to the doctor, the ledger card, and the collector's card.

A fourth and last record is made by entering the account on the bookkeeping ledger, by which it can be removed only by falling into one of eight distinct classifications: 1. Payment at once; 2. Payment in installments; 3. Payment by notes; 4. Payment by suit and garnishment or attachment; 5. Cancelled as chari-

ty, after investigation by the Bureau and agreement with Dr. Jones; 6. Cancelled as bankrupt, or an insolvent estate; 7. Cancelled as a "skip," meaning that the patient cannot be located; 8. Cancelled as an outlawed account.

That much is preliminary routine. Now the wheels of *collection* begin to revolve (still on the same day the account is received).

A letter is mailed John Doe reading like this:

"This office is just in receipt of the above account, which has been turned over to us for collection.

"Kindly let us have your remittance to cover by return mail, or call at our office and make arrangements for settlement.

"Please let us hear from you promptly.

Yours very truly,

Physicians' Business Bureau, Inc.

"P.S. Bring this letter with you."

Nothing is heard from John Doe. After about five days a second letter is mailed, which reads:

"You were advised several days ago that the above account has been turned over to us for collection, but to this day we have not been favored with your remittance.

"Your credit rating with the members of this organization is based on the manner in which you take care of your obligations.

"It is not the desire of this bureau to make an unfavorable report on anyone. We are, therefore, giving you another opportunity to call at this office and settle this account. Your failure to do so will force us to take such action as may be necessary to collect."

Ten days [TURN TO PAGE 115]

Opposite is the Board of Directors of the Physicians' Business Bureau, Inc.; left to right are Drs. J. L. Morgan, James B. Stanford, O. S. McCown, Vice-Pres.; H. B. Everett, Pres.; W. L. Williamson, Secy; C. M. Chilton. Below is the Bureau's office.



The Doctor and his Investments By A

ORDINARILY, in times of stress and strain, such as the country has been passing through, it would be expected that lay investors would turn over their complicated investment problems to institutions run by specialists, such as the general management investment trusts. However, during the great deflation of the last year and a third, there has also been a shrinkage in reputations.

Before the panic, the phrase "investment trusts" constituted words to conjure with. Investment trusts seemed to offer a road to easy wealth, and accordingly, security buyers who clamored to buy such issues paid large premiums above liquidation value for them. But since the panic and subsequent liquidation, it has been demonstrated that managers of investment trusts were human too, and had no infallible guide to the secrets of the future. Accordingly, there has been an unwarrantably great loss of faith in general management investment trusts, resulting in a widespread flight of capital from them.

As a result many investment trust stocks not only no longer sell at a premium above liquidation value, but they are actually quoted at substantially less than the present depreciated liquidation value of their portfolios. On account of their present unpopularity, investment trusts now offer a means of acquiring standard stocks listed on the New York Stock Exchange, at prices substantially below prevailing quotations for the industrial, public utility and railroad stocks themselves.

While admittedly not foolproof, the investment trust principle is sound, and if an investment trust is managed by competent and honest people, it offers a sensible means for investment of a part of the surplus funds of a lay investor. An investment trust makes possible wide diversification and gives the benefit of expert initial selection and continuous supervision of the investment funds.

That investment trusts in the United States have fallen so far from favor is largely ascribable to the fact that the vogue for investment trusts started at or near the peak of inflation. These new investment institutions got their capital from subscribers at the very period when investments in common stocks was later shown to be extraordinarily hazardous and untimely.

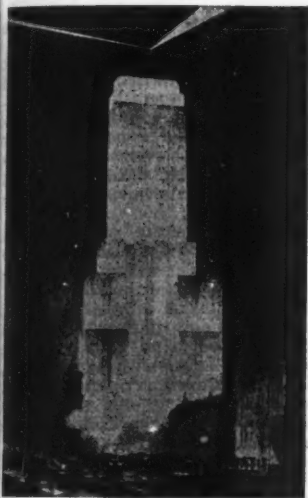
But irrespective of the mistakes of the past, the present offers a suitable occasion for launching new investment trusts, for stock prices are deflated in terms of price earning ratio, in dividend yield terms, and in terms of asset value of going concerns. And if this is a good time to start new investment trusts, it is an equally propitious occasion for considering the purchase, below liquidation value, of the shares of honestly and intelligently managed discretionary investment trusts.

The very cheapness of such shares at the present time reflects their unpopularity. The only type of so-called investment trust that has been in favor in recent months has been the fixed investment trust, in which management has little or no discre-

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By MERRYLE STANLEY RUKEYSER



The new Lindbergh Beacon on the Palmolive Building, Chicago, will light the way to aviators two hundred miles away. (From a lithograph by Miles Sater.)

tionary rights to alter the contents of the portfolio. The public has felt that this very rigidity of indenture protects the investor from managers who fall victim to the shifting psychology of the marketplace.

That may be true, but the rigid pattern of the fixed investment trust runs counter to the economic law of eternal flux in business. Irrespective of the business cycle, some corporations are

steadily growing weaker, and others are continuously improving their status. Recognizing this dynamic character of business, the newer fixed trusts are modifying their pattern and giving management a greater discretion for getting out of weak situations as they appear.

Unquestionably when the annual reports of the discretionary or general management investment trusts appear for the calendar year 1930, they will make dismal reading. The sharp dip in bond prices toward the end of the year even depreciated the bond holdings of many of the trusts, and the year 1930 ended with stock prices very near the bottom for the year. Accordingly, few trusts were able to show "profit on sale of securities" as a recurring item, equal to the pre-panic performance. As a matter of fact, numerous trusts will report "losses on sale of securities."

Moreover, most of the discretionary trusts, will, of necessity, have to show a substantial depreciation in the value of their portfolios, because of the almost universal decline of security prices. By trading in and out, some dexterous investment companies were able to average down the cost of their holdings, but the market for the year was so treacherous that such operations were by no means all successful.

The shares of discretionary investment trusts acted particularly badly marketwise because before the panic they sold at unwarranted premiums above their liquidation value and were found to be in a [TURN TO PAGE 83]

Suggestions to a New S

A LIST TO CLIP AND SAVE By

OFFICE business or information is to be maintained strictly confidential to the office.

2. Absolute loyalty to your employer is requisite. You should regard him during business hours as the very best in the city in his field. Recommendation, without undue emphasis, can win many patients.

3. Every effort is to be made to place the patient in contact with the doctor, in order that no work drift away or into other hands. The doctor is *always available*. Never tell a patient the doctor is "out," "away," or "not in"; say that "he will be back in a few minutes," "is making a call and can be reached by phone," "is at the hospital operating" or "is attending a meeting." This shows that he is not avoiding patients, but will gladly serve them in turn.

4. Names—people are extremely sensitive about their names. Make every effort to get them correctly; both as to pronunciation and spelling. Make a habit of remembering names of children, and always address all business contacts by name. It makes them feel that they are known and that we are interested in them.

5. Over the telephone please cultivate a friendly, welcoming tone and attitude, making it pleasant and easy for the caller to secure the desired information or service. In securing the name, "May I tell him who is calling?" sounds best on the other end of the line.

In all cases, put yourself in the place of the other party and help them as you would wish to be helped. In a pleasant way, however, detect and direct pests who

want to sell or solicit over the phone.

6. The utmost courtesy must be observed toward patients and an even temper always maintained toward children. Punishment must never be inflicted or mentioned. Never become intimate with any patient or child; always retain a business relationship.

7. In a polite way find out every caller's business. Then the doctor will not have to throw unwelcome solicitors out himself.

8. Find out in a general way what the new patient's condition is and what kind of services are desired—complete examination, local examination, opening abscess, dressing injury, etc. Take this information to the doctor and he can come at once to the point.

9. Information for card:

Last name, first name, age, date.

Name of father or responsible person, address, telephone, business, referred by—

10. As to inquiries about charges:

All services are cash. Credit is given only by special arrangement with the doctor.

Regular prices are altered only by special arrangement with the doctor.

Regular prices are: first complete examination, \$10.00; local examination, \$5.00; house calls, \$5.00 to \$10.00 or more according to distance and time; return office calls, \$5.00; lamp treatments, \$2.50; toxin-antitoxin, \$10.00; operations, (tonsillectomy and adnoidectomy) \$75.00; well-baby care \$60.00 per year, \$10.00 down, \$5.00 monthly, 12th month free; laboratory fees extra.

11. Collections: never lose a

ew Secretary

AVE By A LOS ANGELES PEDIATRICIAN

possible collection. In a pleasant way make it known that payment for the first visit is expected before leaving the office. Credit if desired must be arranged with the doctor. If there is any question it must be settled with the doctor before the examination is made. When a series of visits or treatments is over, payment, or some plan for payment, must be arranged.

One of the chief services a secretary can render is collection—and the time to collect is when the patient is in the office. This can be done in a discreet and inoffensive way by a doctor's secretary, who can consider herself his business representative, and can relieve him of this odious part of this practice. Her value to him varies proportionately with her ability to keep his books clear of unpaid accounts without offending patients.

12. Accounts should be kept in such fashion as to facilitate income tax and local tax returns and itemization to patients when requested.

13. Deposit all checks and cash as quickly as feasible. Never allow any to accumulate more than a day.

14. Dates, addresses, phone numbers, amounts, firm names, occupations, circumstances, connections: cultivate the habit of automatically registering them and noting them either mentally or in writing.

15. Watch ventilation and temperature during treatments and examinations. Let parents realize that you are noting the temperature and not permitting any chances of the child's taking cold. Have children sit for a while in ordi- [TURN TO PAGE 144]



That Green Grass May Be O

A WARNING TO DREAMERS By A

SOME questions, like the one which was asked: How old is Ann?" seem to bob up perennially. Among them none is more persistent, nor apparently receives more attention, than the one which has to do with practice, or the desire to practice, in California.

We are particularly fortunate in having a publication like MEDICAL ECONOMICS where questions of this sort may be thrashed out. For they are controversial, as shown by the frequency with which arguments pro and con are found in print.

That there is a feeling of unrest among men of our profession can not be denied; nor the further fact that such unrest is particularly noticeable in times of depression, like the present. For that reason, a word of caution may be of value. Far pastures are proverbially green, but one would do well to inquire whether it is nourishing grass or only painted sawdust. The medical man who looks with longing eyes toward the West, should remember that he will

need to eat, however fair the skies above, or the waves that roll on the beaches.

An article appeared in the November number of "M. E." which might easily mislead as to actual conditions, and might cause regrets among those who neglect to investigate conditions before leaving their eastern location. That is why the article mentioned should not be allowed to go unchallenged. If any man who is contemplating a change of location to the coast should read that article and accept it as representing typical conditions of today, he would be very likely to be disillusioned. Such changes are expensive, and include an element of risk.

It is not fair to allow the statement: "A little equipment, a few dollars, and considerable nerve was all that was necessary" to go unchallenged, at least as representing present conditions.

The writer of the article mentioned states that after a short search he found a town of 1200 persons who had no medical service of any kind; a town where the people urgently needed a physician, but were willing to wait seven months for him to close up his eastern practice and come to them.

Since he does not say when it was that he made this pleasing discovery, it would be unjust to question this statement. But I

"It seemed that this would be a permanent location. Then the highway was built through the town."



Be Only Painted Saw-dust !

By A CALIFORNIAN M. D.

know conditions very well, and would be willing to wager a reasonable sum that there is not another town of that size in the state which does not have several medical men, besides its due proportion of "what-have-you's" as he correctly labels them.

The only answer possible is that there "ain't no such animal," not today. There are plenty of men already on the ground who have nerve, so that it requires more than "a few dollars" to make a start. Optimism, enthusiasm and nerve are excellent qualities, but no man has a monopoly of them.

The author of the article mentioned gives his own experience. In reply, may I be permitted to relate conditions as found during a good many years of practice in that state? No one man's experience is typical, and therefore this cannot be regarded as in any way predicting what would happen to another man. But because it is actual experience, it may be taken for what it is worth, and conditions are as stated.

The first location was a small village, where a friend advised me to take the place vacated by a very old practitioner. It was a mistake; the hamlet had gone to seed. Every young person left as soon as possible to find work elsewhere, and one of the occupations of the older men was playing marbles on the sidewalks. A mental bargain to try out this location for six months was lived up to exactly—and not a day longer. Starvation was just around the corner.

From there I moved to a town of about 600 persons where there was one other doctor. Things went well. It afforded a good living and a little more for both of us, and it seemed that this would be a permanent location. Then the highway was built through the town. We welcomed the advent of good roads, for previously they had been atrocious. Deep dust and chuck-holes in summer; hub deep in water at periods during the winter.

One resident had his car equipped with a pipe so that his carbureter [TURN TO PAGE 97]

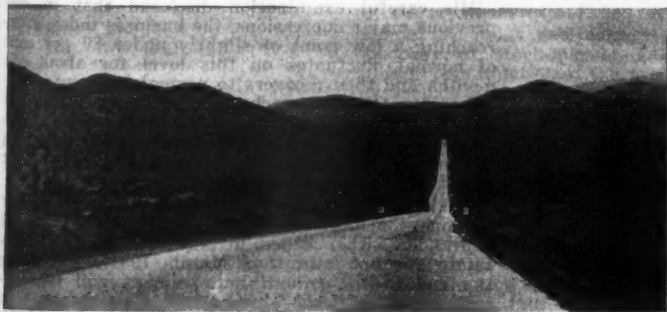


Photo by Ewing Galloway

Everybody's Business

THE TIDE STILL COMES IN By

THE present is a time of alarms and exaggerated fears. It is almost impossible to find anyone who has complete faith and confidence in the satisfactory progress of business and industry in the near future. The conflict of ideas was never greater or more confusing. Viewpoints are totally divergent.

It seems strange that historical precedent now counts for so little in the minds of intelligent people. The public would not agree with the teachings of precedent a year or more ago concerning the inevitable nature of the rule that unsound inflation must always be followed by a distressing business readjustment. Today we find a similar lack of acceptance of the proved fact that industrial activity is limited in the depths to which it may drop and the time the depression may continue.

Forecasters who attempt to set an exact week or month for the turn of the business tide are merely guessing. But those who proceed on the belief that major industrial readjustments wear themselves out in from 20 to 25 months are supported in their opinion by the record of the past.

Warren Persons, former professor of economics at Harvard and past president of the American Statistical Association, not only presents convincing facts and figures to support his assertion that the bottom of the slump has been reached, but sets forth a "probable time of arrival" for the business upturn. In constructing his time-table of industrial readjustment, Professor Persons has kept before him all the available data covering the ups and downs of American trade since 1875.

His careful examination disclosed that in our previous major depressions, the business index after reaching a low point of slightly under 80 per cent of normal, fluctuates on this level for about six months and then recovers to normal in a year. The index for October reached an extreme bottom of about 74 per cent, which level has never been exceeded. There are no unusual adverse factors in the present situation which warrant any belief that industry will go lower.

Taking all the data into consideration, Professor Persons concluded that the trough of our current depression either ended in November or will certainly end not later than March, 1931. Following the end of the trough improvement will be continuous for at least 12 months. This means that business will be normal either by November, 1931,

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By FLOYD W. PARSONS

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© Norman Bel Geddes

Steel and glass and aluminum compose this model restaurant, designed by Norman Bel Geddes for the Chicago World's Fair.

or not later than the spring of 1932.

Therefore, once again let us turn our thoughts to the developments that lie ahead, with business again on the upgrade.

Past experience has taught us that out of a multitude of factors that shape the course of industry to a greater or less extent, there are only four developments which alone have the power to determine the direction in which trade will move over a span of years. These vital factors

are: (1) war; (2) a threat to the gold standard, such as occurred in 1896; (3) continued currency and credit deflation, as in 1875; and (4) bumper crops in the United States in a year of crop failures abroad, as happened forty years ago in 1891.

At present we are free of the influence of these four potent factors. About all that appears to be the matter with us is that

we misdirected the flow of capital by turning it loose in fields of activity that were already sufficiently developed, and at the same time permitted the nation to depart from established economic principles and engage in an orgy of stock-market gambling. This inflation of the prices of securities caused many managements to expand production facilities in order to at least partly justify the new level of prices. Certainly, if this is true, we should not be fearful of the future.

Our primary activity is agriculture, and we may be sure that the consumption of foodstuffs will increase at a rate directly proportionate to [TURN TO PAGE 123]

We Provide a Mirror

Adding and
dividing

TWO tables in our office are spread over with income questionnaire cards from December MEDICAL ECONOMICS, interspersed with charts, ruled blanks, and yards and yards of tabulating machine paper. Unless some one of us loses whatever vestige of sanity he has remaining after the sight of all these figures, and if the present rate of progress keeps on, a report on this survey will be made next month. Until then, think of us with sympathy as we go on and on, adding and dividing, adding and dividing.

One of our readers, in "Speaking Frankly" in this issue, writes a long and sincere explanation of why he did not fill out and return the income questionnaire. This physician states, with an explicitness one cannot help admiring, five distinct reasons for not contributing to the figures, and because his reasons are so candid, and so interesting, I am taking the opportunity to answer them.

Joke answers?

The first of these reasons, according to the doctor's letter, "was the absolute impossibility of getting any large body of people to take questionnaires seriously." He says that he has seen, on at least one occasion, a jokester fill in a questionnaire with a wild and highly inaccurate report, and return it to the editor in a manner known as "kidding."

But that, I think, is neither a reason for failure to contribute to the survey, nor for holding that the results are inaccurate. For, first, though I'd be the last one to say that the medical profession's sense of humor is not of the keenest, I do believe that the medical man's playfulness is at lowest ebb when face to face with the subject of income; and I believe that the percentage of jokester returns is so small as to be a little less than negligible.

And even supposing, for the sake of illustrating the point, that it is not—I am still of the firm opinion that the argument lacks

You Provide the—

force, in that it fails to take note of the very spirit of this income survey, which is *not* to take a census, but merely to hold up a *mirror* in which the profession may, if it wishes, reflect its own earning power. The questionnaire is the mirror; our readers constitute the image. "Whatsoever a man soweth, that shall he also reap."

Which, after all, is the only possible answer to the doctor's objections Numbers Two and Three, variations of the premise that the figures shown on the little white cards will not be the truth. Numbers Four and Five, which you can read by referring to "Speaking Frankly," both attribute motives to our questionnaire which are not within the province of MEDICAL ECONOMICS.

But if I seem to be laying the base for a debate, such is not my intention. The thoughtfully-written letter of this "conscientious objector" has given me the opportunity (for which I am duly grateful) to try to explain more clearly just what our income survey is and what we anticipate for it.

We hope to accomplish the accurate reporting of a group of figures supplied us by our readers. Here in these pages, in a place accessible to very nearly 100% of the entire practicing medical profession, we placed the little white card. It was yours to fill out and return.

Obviously we could not compel you to fill it out accurately, or even to fill it out at all! But many of you did fill it out, and we are busily adding and dividing, adding and dividing. Our trust is in you, and our adding machine. We promise our readers a thorough, accurate (and we believe, interesting) report of the figures given us. More than that, no man can do.

Your image

Report will
be accurate

H Sheridan Baker

Medical Talkies



TWO years ago, Dr. J. B. De Lee of Chicago, an obstetrician and a pioneer in the field of medical motion picture production, when building the new Lying-In Hospital which he heads in that city, stated, "We are wiring our new hospital for the eventual talkie."

Dr. De Lee evidently realized, as time has since proved, that this method of medical recording and instruction would rapidly be adopted by the foremost members of the medical profession. At the recent Twentieth Annual Clinic of the American College of Surgeons, in Philadelphia, twenty-five different motion pictures were included in the official program, no less than one fourth of this number of film exhibits being synchronized with lectures by outstanding authorities in the phases of surgery represented.

Thus it is proved that not only has the audio cinema come to be employed by many individual doctors, but that it has been officially recognized by the profession as a whole.

At the present time there are

Bell and Howell Filmophone unit for sound picture reproduction. Opposite is an example of the use of the "microphone cut-in".

two methods of talking medical film recording available to the physician. One, that employed by the many physicians who have long made silent films with their personal 16 mm. equipment, consists of the usual production of an operating room subject which is then sent to a professional laboratory where a lecture, prepared by the producing physician to fit the data included in the film, is recorded on a phonograph disc.

Such laboratories are located in the larger cities and physicians living nearby may, if they choose, talk their own lecture for the recording apparatus. Reproduction of such sound pictures is done by means of the usual 16 mm. projector in conjunction with one of the turn-table and amplification devices provided by several 16 mm. manufacturers.

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By LOUIS M. BAILEY

The second method is that whereby the physician engages the facilities of a professional sound producing company and, with their technical assistance, the film and sound record of the desired operating technique is produced under the physician's direction. Duplicates of such records, however, whether they employ sound on film or the disc method, may be made for use with 16 mm. projection equipment.

Demonstrating the practicability of making personal talking medical records and the great value of this medium in teaching, a notable achievement in the surgical and medical fields has recently been accomplished by Drs. W. F. Windle and H. B. Kellogg of the Northwestern University Medical School at Chicago.

These two surgeons, who are connected with the medical school's Department of Anatomy, took 16 mm. motion pictures of a dissection. This particular dis-

section was extremely thorough and required about six weeks for its completion. The pictures showed the essentials of the whole matter in two reels of film, thus condensing from six weeks to about half an hour the time in which students may view the procedure and, at the same time, making the dissection available to an infinite number of students as contrasted with the few who could view it actually while it was being performed in the laboratory.

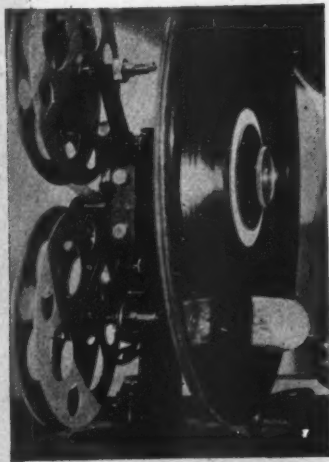
After the pictures had been completed, a synchronized sound record was made on phonograph discs in which the chief surgeon orally explained the procedure included in the movies. The pictures were then shown in conjunction with the sound record by means of a portable device for presenting 16 mm. sound movies, this mechanism being used with the usual 16 mm. projector. [TURN THE PAGE]



In this dissection talkie, the surgeon's voice is heard in a running lecture throughout the entire showing of the picture. Several points of the dissection are pointed out and attention is called to them. Frequently a diagram or part of a skeleton is shown in the pictures and references is made to them by the voice of the surgeon, a method which, needless to say, greatly facilitates understanding of the dissection. The entire talking picture can be presented as often as desired.

Drs. Windell and Kellogg recently took their film, sound discs and projection equipment to the University of Virginia at Charlottesville and gave a demonstration before the meeting of the Association of American Anatomists; this was easily possible as the entire equipment weighs only about ninety pounds. The program was well received, it is reported, and both Drs. Win-

The Victor Animatophone, a compact 16 mm. sound film projection unit, capable of providing theatre-size pictures and volume.



dle and Kellogg believe they have demonstrated a most valuable method of medical and surgical instruction.

Discussing his employment of the talking motion picture, Dr. J. B. De Lee, previously quoted in this article, says, "One of our basic subject films (35 mm. in this case) is of the new Cesarean operation, giving in eight reels the history, the surgical operating room technique, the operation itself and its complications. We have synchronized the voice to this, constituting the first and only talkie of an obstetric case, and wherever it has been shown this film has created a sensation. To see the baby before it is fully born make grimaces, then to see and hear it gasp and cry always bring applause, but the voice accompanying the film and explaining every detail of the operation is more instructive.

"Without any doubt the talking picture has come to stay and will enhance the value of motion picture in medical education, but it will not, certainly not for several years, displace the silent film. A questionnaire passed around at two of the showings of my talkie brought one hundred and seventy-six replies. I had asked which taught more, the silent pictures or films with voice. One hundred and sixty-six preferred the talking picture."

While, sound on disc may ultimately win out, practically, at present sound on film, according to Dr. De Lee, is the best method of reproducing voice for scientific purposes. From such films, it is easy and cheap to transfer the voice to discs. Such discs may, of course, be synchronized for use with sound equipment designed for 16 mm. projection as previously pointed out. Thus, while the original film may be made with professional equipment, it may be duplicated in any desired number for distribution and use with the 16 mm. apparatus, a method which greatly reduces the cost of production and distribution [TURN TO PAGE 111]

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the cluttered desk

MEDICAL ECONOMICS is in partial new type dress this month, with heads set in a type face called Kabel Bold, a modern face that is easy to read and crisp. A number of other changes have been put into effect with the idea of making the pages better for the eye.

"Speaking Frankly" is now located in the front, on pages six and seven.

George A. Lawo, credit man of Memphis, relayed this piece of caricatured correspondence at the Credit Managers' Conference in that city recently: An Arkansas grocer named Chick Arbuckle wrote the Merchants Journal for advice—

"Gentlemen: Mrs. Josiah Timberlake called at my office last week and I asked her when she would pay me the forty-seven dollars she owed for the last eighteen months. She grew very indignant and chased me all over the place, throwing canned goods, vegetables and other things at me. She kicked over my computing scales and smashed my glass show case. What should I do about it?"

The Journal replied:

"You acted unwisely in asking Mrs. Timberlake for the forty-seven dollars. No lady likes to be dunned; in fact, you may have laid yourself liable to an action for slander in thus approaching her. The fact that she has owed the account for only eighteen months would make it appear to any Arkansas jury that

your action was hasty and ill-timed.

"A merchant cannot be too careful in this matter of collecting bills. The average customer is of a very sensitive nature and easily offended if asked unexpectedly to pay up. The best and safest plan is to simply let the bills run, use your reserve capital to finance your business and when that gives out, go into bankruptcy. In this way you injure no one but yourself, which is a much more unselfish course."

Dr. Roland G. Breuer's story of what California sunshine did to him brought, among other answers, this:

*Oh, come to the land of the
western sun,
Where every business is
overdone;
Where stores charge freight
on goods made here,
If you ask the reason, they
think you queer.
They serve you climate with
all your meals;
It's so blame hot your back
just peels.
The Ananias Club includes the
state
From San Diego to the
Golden Gate.
The movie stars marry twice
a year,
Would marry again if the
way was clear.
The grape-fruit here is some-
thing fine,
A cross between lemon and
pumpkin rine.
Where cows eat barley instead
of hay,
And the cream is lost in the
milky wan.
They sell you lots that are
made by hand,*

REG. U.S.

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COMPOUND**

Systemic as well as Symptomatic Value

In order to determine the true value of the new therapeutic agent—FARASTAN (Mono-Iodo-Cinchophen Compound)—it was essential that controlled clinical tests be conducted by a number of independent investigators.

Several of these investigations have been completed, all of which confirm that FARASTAN introduces a new and effective weapon of attack on Arthritic, Rheumatoid and Neuritic problems.

An unusually high percentage of sufferers have not only been relieved from the symptom of pain associated with each condition, but have shown definite systemic improvement with increased motion and reduced swelling of joints.

Confirm these findings in your own practice.

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and literature*

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Philadelphia, Pa.

And make you believe they
are really land.
The view of the ocean is really
nice;
This is included with the
price.
They weigh the sack and then
the fruit
Then weigh again with
fingers to boot.
They claim it's wet if it rains
once a year
And you get so dry you
can't shed a tear.
The chickens have mites, the
dogs have fleas;
The desert wind blows and
the oranges freeze.
We shovel sand, you shovel
snow,
Just a standoff, far as I
know.
So tune up your flivver, start
for the West
Where jobs are scarce and
pay is less.
Bring all your cash and plenty
of clothes;
When you'll get any more
the Lord only knows.
I am telling this story which
I know is true,
As seen by me through eyes
of blue.
If the Booster's Club ever gets
this back
They will change my eyes
from blue to black.
They asked me to write the
truth to a friend.
Now I have done and this is
the end.

The sender, a Colorado doctor,
adds: SO I MOVED FROM
CALIFORNIA!

Dr. Breuer himself says that
now when he goes out on the
street in San Carlos, or for that
matter anywhere else on the Pa-
cific Coast, he has to put on false
whiskers and walk with a limp
in order to avoid being followed
by a crowd of people who point
and yell "He called California a
rose-lined grave—YAHH!"

The thing, he says, is beginning

to get into his dreams, especially
when he commenced getting let-
ters like this—

"Dear Sir: I read 'So I Moved
etc.' I think you are crazy. A
Milwaukee M. D."

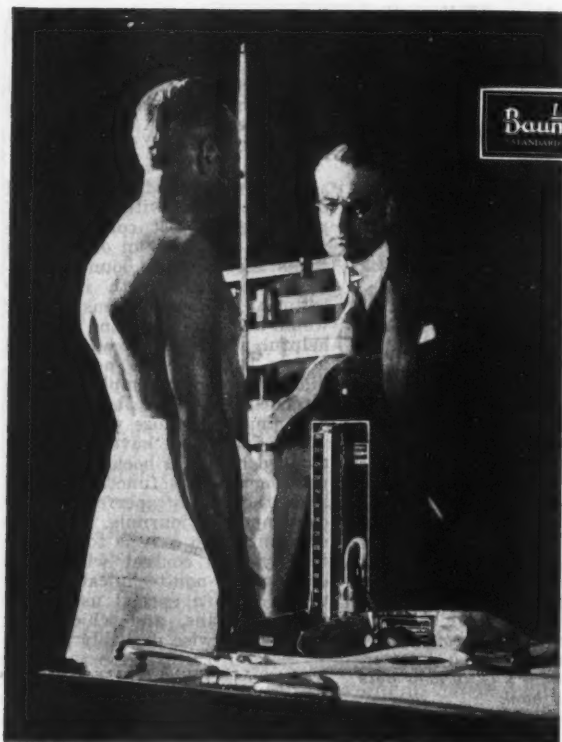
When we started "the cluttered
desk" we did so with the idea of
providing a quiet corner where
we could unload a lot of assorted
items such as are bound to ac-
cumulate each month in every
editorial workshop, items we felt
would be interesting, and possibly
helpful. The fact that we included
a few books in the assortment,
did not, we hope, imply that we
intended this to a book review
department, because we did not.

The fact is we have studiously
avoided having a book review de-
partment, which function is ably
and thoroughly performed by
contemporary journals. What we
do want to do here is to put our
readers into contact with those
occasional non-technical books
which have a special usefulness
for physicians, and which they
would otherwise probably miss.

Books, for example, like "My
Automobile; Its Care and Opera-
tion," by Harold F. Blanchard
(Scientific Book Corporation, N.
Y.)—and if you doubt that such
a book might have a special use-
fulness, we ask whether a classi-
fied list of "hissing sounds,"
"squishing sounds" etc., would be
useful some dark and stormy
night—

No automobile manual we have
ever seen (and we have a weak-
ness for them) has contained
such a clear classification of
symptoms, and treatment, as
this; and as a result we are going
vigorously after all those squish-
ing sounds we have heard driving
to and from the office.

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Physicians who use aneroid bloodpressure gauges nowadays don't expect them to be accurate to the millimeter, because they understand the nature of such instruments. They try to establish the degree of variation and make allowance for it when taking their readings.

However, an instrument that concededly does vary, may easily show a different degree of variation from one reading to another.

In cases where regular check-up of the patient's bloodpressure is necessary, the unvarying accuracy of the Baumanometer is indispensable.

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and Makers Since 1916 of Bloodpressure Apparatus Exclusively

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New York



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Smallest—Lightest—Handiest

Where Oh Where

HAS MY PRESCRIPTION PAD
GONE? By J. F. MONTAGUE, M. D.

If the gentle reader never to himself hath said the above lines he belongs to the well known genus of "a rare bird." Surely, I cannot be the only physician whose desk contorts itself into such utter disarray! Of course, as a matter of fact, I rather pride myself on the cloud of chaos that hovers over the heap of papers on my desk, since it gives an impression that I am busy and and this impression is always pleasing (at least to one's self!)

The only fly in the ointment, non-medically speaking, is that occasionally I want to find something—that something usually being my prescription pad. A long and profane experience hunting for said prescription pad has led me to believe that the old adage about the needle in the haystack should be changed and prescription pads be written in to the record. However, it is upon this very point that I have

something more to offer than an attempt at humor.

I had noticed a form of memorandum pad for sale at the stationers and the thought occurred to me that if prescription blanks could be made up in rolls similar to the memorandum pads they could be much more readily found, and moreover, would not be used for scratch paper and the like. While bent on inven-

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"Ultraviolet irradiation produced a clinical arrest of the disease with the first treatment in 92 per cent of our cases."

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Both the Hanovia Alpine Sun Lamp for radiation and the Kromayer Lamp for the local application of Quartz Mercury Ultraviolet, have been considered standard equipment of the profession for twenty-five years. A large share of the clinical knowledge and technique in the use of Ultraviolet Therapy is founded on the use of Hanovia Quartz Lamps.

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City State

tion, I determined to go further and remodel Dr. Aesculapius' time-honored scrap of paper. Accordingly, I devised and herewith suggest the arrangement shown in the accompanying prescription blank. It has certain advantages:

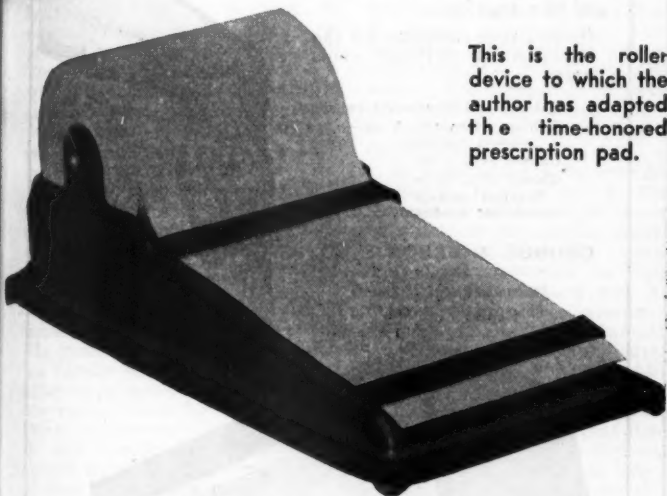
It definitely lines up the name of the medication with the amount; that is, the medicine stated on the second line naturally calls for the amount stated on the second line on the right hand column. Moreover, the metric system is deservedly given a helping hand by the suggestion

of grams and cubic centimeters in the quantity column.

There is little more that the device I have described has to offer than that on one's desk it is always accessible and neat-looking and that the prescription written upon the form I suggest makes for more certain accuracy.

I trust that remarks submitted herewith prove of some value in diminishing the amount of blue smoke created by the inability of the average doctor to find his prescription pad if and when necessary.

This is the roller device to which the author has adapted the time-honored prescription pad.



"Speaking Frankly", our readers' comment section, appears this month on pages six and seven.

Obliterate Varicose Veins

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"Most universally useful. Combines the advantages and reduces the disadvantages of other solutions."

Composed of equal parts Glucose 50% and Sodium Chloride 30% in 10 cc ampoules. Supplied in boxes of 6 and 25 ampoules.

Other Breon solutions for the injection of varicose veins are:

Quinine and Urethane 1 cc
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Glucose 50%, 10 cc

Detailed technic accompanies the medicaments.

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For Those Who Survive

By A LIFE INSURANCE EXECUTIVE



UNTIL a comparatively few years ago, most of the insurance carried by the average man was considered in the light of individual policies,

payable in one sum to the beneficiary. Life insurance was rarely thought of as a plan to provide income to the family replacing that which they had lost. The result was that when a widow received the proceeds in cash, she was immediately faced with a problem—that of investing the money to receive a fair, yet safe return.

In many cases this was a new responsibility which came at a most inopportune time, and lack of experience often resulted in depreciation, even in loss of the proceeds.

Today, much more thought is usually given by the buyer of life insurance to the needs which his family will be forced to meet after he is gone. In building his insurance estate he wisely gives more consideration to the income it will produce, and how he should arrange that income that it shall cover these needs.

It is of importance to know that one may make a special agreement with a life insurance company to pay the beneficiary in installments on the following general basis:

1. For a certain number of years.
2. A definite sum monthly, quarterly or annually to continue as long as the proceeds augmented by interest will last.

3. Pure income, retaining the principal intact for further distribution later.

4. Installments in the form of an annuity based on the age of the beneficiary and continuing throughout her life.

The principal payment referred to is sometimes arranged to be paid to a son at a time when he might be ready to establish a business—or at some time when preferably he would be well able to handle the money. For a daughter, a life income is usually preferred to a lump sum settlement. The companies in general are now paying between four and a half and five percent interest on proceeds.

In some cases it is considered advisable to arrange a Trust Agreement with one of the well known trust companies, many of which have recently formed special departments to handle trusts of this nature and have done a considerable amount of advertising in this connection. The proceeds from an insurance estate might best be payable to a trust company under a Deed of Trust in those cases where there is a possibility that discretionary powers will be desired, as the insurance companies are not constituted for such powers.

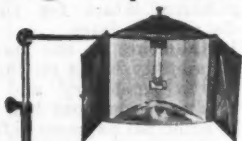
As each individual case has particular circumstances which need to be taken into account, most men consider it good judgment to discuss the matter with a competent life insurance man or a representative of a trust company, or with both. An



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A new Prescription Quartz Lamp that measures up to modern Burdick standards. A lamp that you can rely upon—to supplement office treatments efficiently—to bring ultra-violet to the many

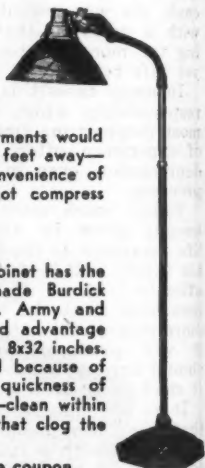
patients who cannot come to your office—to increase resistance to disease and safeguard health in the home by the action of ultra-violet on mineral metabolism and synthesis of Vitamin D—and lastly to keep the use of Ultra-violet under your direction, as the lamp can be sold or rented to your patients on prescription only.

Infra-red!

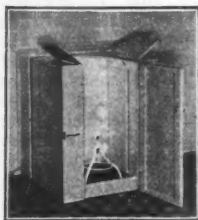


The new prescription Zolite-Z-70
—makes possible the benefits of

Infra-red at all hours and conditions where office treatments would be impossible. Its great flood of rays can be felt ten feet away—and patients appreciate the soothing comfort and convenience of its radiant heat in place of the old, bothersome hot compress methods!



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The new Fold-in Light Bath Cabinet has the famous features that have made Burdick equipment standard in U. S. Army and Navy hospitals—with the added advantage that it folds away into a space 8x32 inches. One leaves the bath refreshed because of the scientific ventilation and quickness of sweating at low temperatures—clean within and without from the poisons that clog the system and presage disease.

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outline of the plan which will most effectively serve the purpose, will be submitted for detailed consideration.

The building of an estate is something in which all of us are vitally interested, but there is ample opportunity for more thoroughly weighing of whether or not the estate will eventually be distributed as we would wish, in such a way that the beneficiary shall receive a fair and safe return eliminating all worry and responsibility of investment.

It becomes more and more evident that the surest and safest way for a man to build an estate is through life insurance. By

making systematic deposits of merely the interest, the principal is guaranteed to the dependents of the deceased and will be paid over to them without delay, legal expense or shrinkage, which invariably occur in the settlement of an estate composed of assets other than life insurance.

Recognition of these facts has resulted in the purchase of tremendous volumes of life insurance until the total in force in our country is now over one hundred billions of dollars. It is predicted by those in a position to know, that within the next ten years the total will be double this figure.



Anesthetist's Accounts

THE Syracuse (N. Y.) Credit

Bureau's bulletin makes the observation that most family physicians and surgeons seem to be very absent minded. More accounts received from anesthetists are disputed than any other class and the Bureau practically always finds the fault to be plainly that of the patient's physician in failing to explain the extra charge for the anesthetist. He should explain fully that this extra charge has nothing to do with the regular doctor's bill, the hospital bill, the operating room bill or laboratory charge.

The debtor says he "never saw this man" who now sends a bill for \$5.00 to \$35.00. It is suggested that the anesthetists form a league and penalize the absent minded Brother who omits to tell

the patient that an anesthetic is always "extra."

Or perhaps the anesthetist may let the patient "out from under" long enough to introduce himself. Anything which might help in the collection of these accounts would be appreciated, says the Bureau.

Homeopathic Convention

The 76th Annual Convention of the Illinois Homeopathic Medical Association will be held at the Palmer House, Chicago, May 5, 6, and 7, 1931.

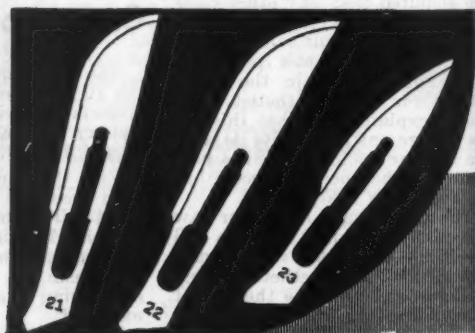
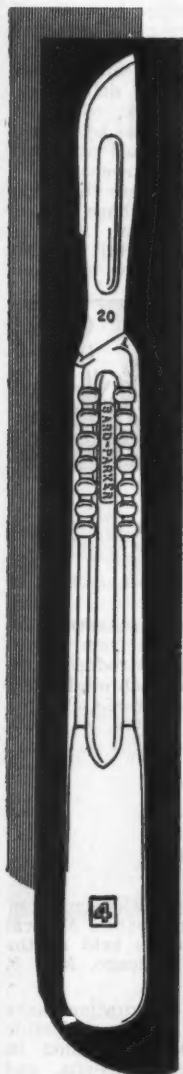
Five thousand invitations have been sent to the homeopathic (and allopathic) profession in Illinois, Michigan, Indiana, and Kentucky, Missouri, Iowa, and Wisconsin. A record attendance surpassing that of last year is expected.

It's Sharp

The Bard-Parker knife provides the physician and surgeon with a detachable blade scalpel, which is easily cleaned and sterilized. Used Bard-Parker blades are readily replaced with new razor sharp blades.

PRICES: Bard-Parker handles—\$1.00 each. Blades, six of one size per package—\$1.50 per dozen.

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Collection Wizards

By FRED B. HOVEY, SECRETARY OF THE
AMERICAN SURGICAL TRADE ASSN.

SOMEWHERE in the United States at this moment some otherwise sane physician is being gradually nudged over the border-line of good judgment, into a peculiar mental haze in which he is ready to believe in the existence of wizards, merlins, sorcerers, Santa Claus, and other legendary figures.

While in this state of child-like faith he is being slowly but surely manoeuvred into signing his name at the bottom of an innocent appearing piece of paper which will later turn out to be a collection contract, sealed and bound.

The person who is working this amazing transformation is the glib-tongued representative of a collection agency, and when the doctor-victim awakens into full consciousness some weeks or months later, it will very likely be to find that he has been hypnotized out of a considerable amount of hard-earned cash.

He will realize then that magic and sorcery do not exist in the collection business—or if they exist at all, it is in the ability to enchant the physician-prospect into the state of mind referred to above.

Ever since the appearance of "Collection Pitfalls"—the first of a series of articles exposing the activities of a certain type of collection agency—I have been turning over in my mind the various causes which seem to make the medical profession particularly easy prey for these smooth-mannered but sharp-toothed wolves of business.

I have come to the conclusion that the fundamental cause lies

in the simple fact that the doctor's natural aversion to collection routine makes him eager to find some magical short-cut to 100% collections. He is predisposed to believe that some mysterious, magical process must exist somewhere by which money can be easily and painlessly extracted from delinquent debtors. Then when a man turns up some fine morning at the office door making claims to be in possession of just such a magical wand, the doctor falls easy victim.

Having followed the above-named series of articles, it is my impression that the average physician has no conception of the actual problems of collecting accounts, and that if he reasons at all concerning the matter, he reasons but superficially. He fails to realize that just as there is "no royal road to learning," so is there no magic way of collecting.

Just as the children of royalty must study to learn in the same manner as do children of the poor, so also must the physician's claim against a debtor be collected by hard, intelligent efforts, repeated dunning, and often by suit and execution.

I shall not dwell upon the obvious importance of seeing that credit is wisely extended. The increasing use of credit information, gathered and made available by merchants' credit bureaus and other local organizations whose members report credit experience, makes this easier every day.

The particular fact that I want to emphasize is that, while many physicians have been looking far

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Physicians who use Westinghouse X-ray apparatus for routine diagnosis in their every-day practice tell us they find it valuable in two important ways. It often proves their main support in diagnosis where they might otherwise be misled by a patient's vague and often undependable description of his symptoms. As one of them puts it: *"You can virtually see what is going on; and what is more your patient knows you can see, and so he has implicit confidence in your findings. This is important. The very foundation of a physician's practice, next to his own skill and knowledge, is this confidence of the public. On it inevitably depends his reputation and prestige."*

For routine diagnosis by the general practitioner, Westinghouse has developed a special X-ray unit, the new No. 6. It consists of a counter-balanced radiographic and fluoroscopic tilt table with built-in transformer so arranged that the usual overhead aerial may be eliminated.

All the care and precision in design, manufacture and inspection that the Westinghouse name stands for has gone into the production of this new unit. Its cost is exceptionally low. Use the coupon below for convenience in securing details.



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afield in their search for a satisfactory collection service, they have been overlooking an efficient and highly competent collection service that lies at their very door, namely—their own local attorney.

It is my opinion (an opinion shared by many men employed in credit work) that most local attorneys are as well equipped to make collections as a collection agency, with the exception that where there is a central credit bureau, the possibility of being derated as unworthy of credit is a powerful influence in the debtor's mind, and may, in many cases, have more immediate effect in inducing payment than a demand for payment from a local attorney.

As a matter of fact, as has been pointed out in one of the articles published in MEDICAL ECONOMICS, there are few, if any, collection agencies which have branches in more than three or four of the largest cities in the United States. In all other cases, the agency, beyond making demands by letter and telegram, has no recourse in making collection except to *send the claim back to a local attorney for collection!*

This being the case, the claim which started with the doctor and was forwarded to the collection agency, comes right back to a local attorney in the doctor's community, having undergone no change in the process beyond a severe whittling down, or even total loss, due to charges for "service."

The whole matter would have been simplified, with benefit to the physician, by handing it to the local attorney in the first place!

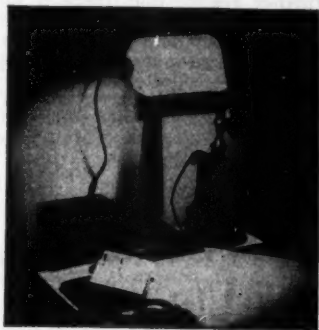
There are commercial attorneys in practically every town who are glad to handle a physician's claims if allowed a fair contingent fee for collection, based on the difficulty of collecting such claims. If the doctor's personal attorney does not hap-

pen to handle commercial collections, it is a simple matter to be referred to one who does.

Nothing better displays the cupidity of the professional man than his failure to use this short-cut in disposing of his claim. A reputable attorney does not make false promises, and hold out the lure of magical methods; he retains, if the account is collected, a fair contingent fee and returns the rest to the physician—a far better result than ensues in far too many cases where the claim is turned over to an agency.

It is a sad commentary upon the physician's judgment that, because the local commercial attorney is honest in stating his terms, and informs the doctor that he will have to pay a considerable portion of every claim collected for the attorney's services, the doctor hesitates to use the attorney's service.

The same doctor is quite ready to believe the statement of a collection agency that claims can be



collected for almost nothing, when, as a matter of fact, the services of the collection agency usually cost almost 100% and often even more, of the claims turned over for collection.

Then too, there is one other emotion that induces the physician to try the fraudulent collection agency. This emotion has been expressed in many ways,

among them being: "Familiarity breeds contempt" and "Distance lends enchantment to the view."

The shyster collection agency pretends to have some superior and magic ability to collect, not possessed by the local attorney, and human nature is such that the doctor is willing to believe this preposterous claim *because the agency's office is a thousand miles away!*

The attorney's humble office, on the other hand, is right in town, perhaps passed each day on the doctor's rounds—and there is consequently no stimulus to the doctor's imagination.

Careful thought ought to convince any physician that the local attorney is more familiar with the local laws, and probably much more familiar with a debtor's financial condition than any "foreign" agency.

If the doctor will only realize that the collection of claims is *real work*, and that he will have to pay substantially for having that work done, and if he will further realize that there is no method of collecting which the local attorney does not possess in just as large a measure as any "foreign" collection agency—there will be fewer victims for the bait of the shyster collection agency!

To Visualize Call List

WHEN a physician of Milbury, Ohio, began practice fourteen years ago, he had plenty of time to keep his appointments and make all necessary calls. He kept a note book in which he put down the calls for each day. He found it easy enough to make the rounds, the calls not being widely scattered.

As his practice grew, it be-

came necessary to group the calls for each day, so far as possible by locality. In order to do so more effectively, this doctor evolved a clever plan which at the same time limits the number of calls and localizes them.

On the wall of his office he has a map of the district in which he practices, showing each block on a large scale. The map is posted on a piece of burlap stretched on a frame so that tacks can be put in easily. The doctor uses ordinary upholstering tacks having seven different colored heads, each color representing a day. Each evening he posts the new calls, as far ahead as possible.

If, for example, on Monday he calls on Mrs. Brown and decides he will not need to call again until Wednesday or Thursday, he looks at the map on arriving back at the office and sees that the tacks for Wednesday are not in the locality where Mrs. Brown lives. The map tells him also that there are already as many as he can call on in one day.

Then he sees that the tacks for Thursday are closer to Mrs. Brown's house and there are not so many of them. He sticks a Thursday tack in that district, at an accurate point, and makes a note of the call.

He reports that the plan helps considerably, in saving time, mileage, and a crowded day. It also helps to give patients better service by permitting him to schedule calls he might otherwise postpone.



Are We Underpaid?

By H. M. TOLLESON, M. D.

THERE is much ado about the doctor's fee, methods of collecting, and like problems. Here is a thought not so much discussed in the meetings of our medical societies and in the editorial columns of our journals:

There is one way in which a doctor, a real physician, is paid that isn't entered on his ledger. There is one form of compensation that doesn't come under the income tax report.

Have you, Brother Physician, ever experienced the feeling of satisfaction and gratification that comes like warm sunshine permeating the drab, sordid grind of the day's work from the sight of a helpless infant gradually growing stronger under your care?

Has your heart been touched and your eyes moistened as a mother looks up at you with a glowing face as she holds a baby who is recovering from the brutal attack of disease, recovering as a result of your timely interference?

Do you recall that night when you sat beside the patient as he passed his crisis and the anxious little wife and bewildered little children looked up to you and put, all their trust and faith in you? And then, when you could safely say, "He is out of danger, Mrs. Brown"—do you recall that look, that "Thank God—and the Doctor!"? Did you collect a fee? Whether you did or not, Doctor, were you underpaid?

In the practice of this greatest of all professions, the statisticians will tell us that the pay is small for the service rendered. The general cry during the depression is "Collections are poor"!

True as these things are, Doctor, all of the certified accountants in the world couldn't balance your books if you could estimate the pay you receive in the form of knowledge that during this day you have cured disease with the help of God, relieved pain and postponed death, the inestimable joy that comes from a knowledge of work well done.

In Pneumonia Start treatment early

In the

Optochin Base

treatment of pneumonia every hour lost in beginning treatment is to the disadvantage of the patient. Valuable time may often be saved if the physician will carry a small vial of **Optochin Base** (powder or tablets) in his bag and thus be prepared to begin treatment immediately upon diagnosis.

Literature on request

MERCK & CO. INC.
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Dr. Hermann

ANOTHER REMINISCENCE TOLD TO FREDERICK A. FENNING

DURING thirty years in the State hospital service I saw many of my professional associates develop into specialists. Usually these men followed one or another of the lines that are embraced in the rather wide classification of nervous and mental diseases. They became psychiatrists, neurologists, psychoanalysts, and two or three achieved reputations as clinical pathologists.

It is probable that the specialist who did most to serve his fellow men without regard to personal advancement was a doctor whose specialty was nothing more nor less than friendship with the patients. I shall call him Dr. Hermann.

This man remained at the hospital in which he had served his internship, advanced to first assistant physician, and frequently was acting superintendent. On two occasions, to my knowledge, he might have had a superintendency but declined because this would have interfered with the highly unusual activity in which his deepest interest was centered.

During his early days as an interne, Dr. Hermann began actually to get acquainted with the patients on the wards in the department to which he was assigned. Most ward physicians can call their men by name, and they come to know something of the family connections of patients about whom there is correspondence. Dr. Hermann, however, seemed to adopt the premise that hospital inmates have their individual, personal interests just as do people who live amid more congenial surroundings. He knew

that among normals there are those who are prone to discuss their hobbies and their own interests, even to the extent of boring friendly listeners. He willingly extended this privilege and accorded this right of expression to abnormals and sub-normals.

Long before the doctor became the head of his department he had formed a genuinely intimate acquaintance with nearly all of his patients. As in every hospital, there were a number of men believed to be so demented as to have no understanding, and to be totally incapable of self-expression. Physicians and attendants usually make only slight effort to converse with patients of this type. But Dr. Hermann's friendship extended to these men, and it is an actual fact that the faces of the demented men on his wards were noticeably brighter than those of similar men elsewhere in the institution.

When hospital physicians are off duty they invariably like to leave the reservation and go to town. This is natural; I always encouraged their doing so for it tends to prevent the depression which is likely to be experienced from constant contact with mental patients. One medical director that I knew made a ten-mile trip to the theatre no less than three times a week for twenty years. He grew heartily tired of theatrical shows, but insisted that they afforded him a necessary diversity of scene and thought.

Contrary to the general practice, Dr. Hermann spent his spare time on the wards talking and listening to patients. He took the men singly, seeking thereby to

Attacking the G-U infection Orally

The descending antiseptic action of Mallophene is its most striking property. Orally administered, Mallophene affords convenient means of continuously passing an antiseptic through the kidneys and entire urinary system, thus tending to sweep out infections already present, and to prevent external infections from ascending. Coupled with the antiseptic action of Mallophene are healing and analgesic effects. These properties are the underlying reasons for excellent results following its use in G-U infections, such

as:

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PYELITIS - - PROSTATITIS



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establish the more intimate relationship that grows out of personal conversation. He listened to these men with the same courtesy he exhibited to fellow members of the staff. Many an uncommunicative, seclusive individual who repelled all advances, and answered questions, if at all, in a surly and abrupt manner, would be observed having a quiet confab with Dr. Hermann.

The case of Old Peter, as we called him, attracted a great deal of attention. This chap was a Dane and had been in the hospital many years. It was known that he could speak and understand our language, but his reticence was probably the most profound of all the men in the institution. He virtually never talked. Although he spent much time in reading, he could not be led into discussion.

Hermann watched Old Peter for several weeks and concluded from his countenance and the character of his reading that he was a man of intelligence. The only other Dane at the hospital had been used to trying to get Old Peter to talk, but gave it up as an impossible task. This, however, did not discourage the doctor. He bought a Danish dictionary and a couple of simple books and set out to learn something of the language. I do not know how long it took him to acquire a limited vocabulary, but the fact is that he did so and one day, seating himself next to Peter and smoking a pipe in silence for half an hour, he made a casual observation in Danish.

Old Peter responded in the most natural manner and the conversation continued for a considerable time. Very often, after that, the patient and Dr. Hermann could be seen talking together. It was by means of this intimacy that the doctor came to have an understanding of the patient such as the hospital had never been able to obtain. The man was extremely well educated and had earned an engineer's degree in a foreign university.

He was mentally off balance in respect to perpetual motion, and his insistent annoying of patent attorneys resulted in his being taken into custody and sent to the hospital. This he had resented deeply. In a strange land, the language of which he had never mastered, he was up against a solid barrier. He accepted the condition; as is said of a man who declines to plead to a charge in court, he stood mute.

Old Peter's theory of perpetual motion was deep-rooted; he had no friends and no money. Dr. Hermann wisely decided that the hospital was the best place for him, and determined that life should be made more interesting for the old fellow, who at the same time might be used to the advantage of the institution. Aside from his obsession, the man was exceedingly practical, and as a mechanical engineer was well grounded and had had much experience. He became the technical adviser on the operation of machinery at the hospital and on other engineering problems. Dr. Hermann's interest in this man not only brought congenial occupation to the patient, but it raised the standard of mechanical efficiency of the plant at no expense to the State.

It was interesting to observe that with all the time that the doctor devoted to visiting with patients, he managed to keep well abreast of advance thought in the field of mental medicine. Except on matters of importance, he was never disturbed in the evenings, for it was known that from about eight o'clock until midnight were his hours for reading and study.

His was an absorbing mind. I believe it must have contained an expert faculty for segregating and congregating the high spots in the technical treatises that he read. At staff conferences, the physicians often were amazed and charmed by the clear and concise manner in which Hermann would quote American and European authorities.

I recall that on one occasion a

Use DRYCO in Nutritional Anemia!

Iron is a Vital Factor in Infant Metabolism

The proportion of mineral elements of the milk is an important factor in promoting basal metabolism and satisfactory feeding.

Babies Must Get their Iron from Milk!

The iron content of DRYCO is two to five times as great as that of natural liquid milk. "This increase in iron content is obviously due to the intimate contact of the milk with the desiccating cylinders." DRYCO, the roller-processed dried milk, "has failed to cause the degree of nutritional anemia commonly reported for natural liquid milk." (Supplee, G. C., Dow, O. D., Flanigan, G. E., and Kahlenberg, O. J., *Journal of Nutrition*, Vol. II, No. 5., May, 1930.)

Another Reason Why DRYCO Has Given Such Satisfactory Nutritional Results

Send for samples and literature on the iron content of Dryco. Pin this to your Rx blank or letterhead and mail to Dept. D., M. E.

THE DRY MILK COMPANY, Inc.
205 East 42nd Street, New York, N. Y.

DRYCO

PRESCRIBE DRYCO IN ANEMIA

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doctor confessed doubt as to a diagnosis, explaining that leading psychiatrists were in disagreement on the particular psychosis. He cited White and Jelliffe on the one side, and Meyer and Glueck as holding contrary views. Dr. Hermann at once threw into this balancing scale a very positive and seemingly incontrovertible opinion held by Jung, of Switzerland, and Krappelin, of Germany.

It can readily be understood that the intimate personal relationships that Dr. Hermann established with the patients, led to a very considerable amount of correspondence. Indeed, instead of sending to the family of a patient the usual stereotyped letters saying, "Your son Morris remains in about the same condition," or "The general condition of Morris remains unchanged," the hospital found itself writing personal messages.

For example, we would write to a parent, "Morris talked with us today about the black horse that you used to drive when he was a little fellow." Simple messages of this nature brought scores of thankful replies from families of patients.

One summer morning it was observed that Dr. Hermann was not in his office. Telephone calls to his quarters were unanswered. One of the staff, sent to investigate, found that the doctor had quietly passed away during the night.

The chapel, in which the services were held, was located back from the main roadway in a beautiful grove of evergreens. It had been arranged by those in charge that after the benediction twenty patients, selected from the various wards, would form in double line on the chapel steps. At the proper time these men, who had been seated throughout the room, made for the rear to form their lines.

Then the unexpected happened; they were followed by all the other patients. The attendants were taken by surprise; they could not check the orderly march

without creating disorder. There was absolutely no prearrangement of this part of the program. It was the spontaneous act of the large audience.

As the men passed through the door they quietly fell in line, extending the formation made by the selected twenty. Between these rows, of more than four hundred men in each row, reaching the full length of the pathway and some distance up the road, the body of Dr. Hermann was borne.

Not an order was given, not a word spoken. These patients were paretics, praecox cases, men with senile dementia, victims of acute hallucinosis, and were most decidedly deficient in the guiding spirit which influences human conduct. I shall always believe that they were led by Divine hand to pay this remarkable tribute to one who was their sincere friend.

Death and---

HERE is a set of questions every good tax-payer ought to be able to answer with "yes!" They were drafted by the Indiana Taxpayers' Association:

Do you know your total tax rate for this year?

Do you know the rate for the various governmental units for which you are taxed?

Do you refuse to sign petitions calling for public expenditures unless you are convinced of their necessity?

Did you examine your local budget last fall to learn whether your money was to be expended wisely?

Do you plan to make a study of the budget in your community this year before it is approved?

Do you know that the total of this budget determines what your tax rate will be for the coming year?

Old Reliable



Here is a good, old New England product—a pioneer that showed the rest of the world how to make more palatable cod liver oil with greater vitamin potency.

You will remember that it was Patch who invented the cooker which enables the fisherman to extract the oil from the livers of fresh codfish, right out on the ocean.

Now Patch brings to you, doctor, a guaranty of vitamin potency that is most important. As shown below, it means 3600 A units and 450 D units per teaspoonful dose.

Added to this high vitamin potency you have the unusual palatability of Patch's, which overcomes the resistance of the fussy youngster—often the child who is most in need of cod liver oil during the winter season.

You have undoubtedly read the recent research which confirms the importance of the combination of vitamins A and D found in cod liver oil. When you prescribe Patch's Flavored Cod Liver Oil you know that your patient is taking an oil of the highest possible vitamin potency and the greatest palatability.

We would like to demonstrate Patch's palatability to you, and the coupon below will bring you a bottle for this purpose.

THE E. L. PATCH CO.

Boston, Mass.

THE E. L. PATCH CO.,
Stoneham 30, Dept. M.E.-2
Boston, Mass.

Gentlemen: Please send me
sample of Patch's Flavored Cod
Liver Oil and literature.

Dr.

Address

Guaranty of Potency



**1000 A Units
per gram of oil
125 D Units
per gram of oil**

PATCH'S

The Fee Grows Too

By CARLETON CLEVELAND, D.D.S.

THOUGH it is only a matter of one score years and ten since the beginning of the century, many changes have come during this time to the practitioner of medicine. One change that is particularly noticeable, to the layman at least, is the increased charge for medical service as compared with the charges of thirty or forty years ago.

The cost of medical service has indeed become an issue, as evidenced by the attacks of the press in the recent controversy over "medical ethics and lower costs of medical care," growing out of the methods and practices of the Public Health Institute of Chicago. The investigation into the methods of this organization, a post-war development, and the Illinois Social Hygiene League, finally resulted in the expulsion of one of the officials of the latter organization from the Chicago Medical Society.

The newspapers forthwith issued many and varied statements both in headlines and on editorial pages. On April 21, 1929, the *New York Times* is quoted as having asked the question, "Is the socialization of health care to be intelligently and progressively developed, or is it to be checked by private physicians acting as an organized society for the protection of their professional privileges?"

Shortly before this, on April 12, 1929, the *Chicago Daily Journal* (now out of publication) stated that, "Medical ethics doubtless will be adjusted by the profession to meet the new conditions. The health of a people is one of the prime objectives of

civilization. An organized and methodical system whereby the best medical treatment is available to all who are ill must come eventually in this intelligent and progressive age. Society will shape its health program to suit its needs."

From these utterances it will be readily perceived that the press (as usual) jumped to a conclusion, that the economic fundamentals of the issue were completely overlooked.

Anyone looking beneath the surface will realize that improved service is ample justification for higher fees; and as for the necessity, there is plenty of that in the higher standard of living of today. The capital investment required to carry on a successful practice at present is considerably greater than when "father was a young man."

In the old days the physician drove about with his horse and rig, carrying practically the entire equipment which science and technology could then provide, in his hand-bag, or in saddle-bags if he practiced in a rough country without roads. His reception room was sparsely furnished; in the back office was a table, possibly a roll-top desk, a straight backed chair or two, and a leather-upholstered surgical chair, which could be converted into an operating table or examination table.

Where the physician of a generation ago served a period under his preceptor and then completed the requirements of a college curriculum in medical science, the young man of today who aspires to a medical or surgical career, must make an in-

Many doctors use Absorbine Jr. for ringworm of the feet... If YOU are unacquainted with it, let us send this sample

ABSORBINE JR. has distinguished itself in recent months as a sound specific in the treatment of interdigital ringworm. Physicians from many parts of the country advise us that they rely on it to help them in the treatment of this widespread ailment. Their judgment has been amply verified in the clinic and the laboratory.

And its usefulness is enhanced by the fact that, in exacting tests made by a famous New York laboratory, the report was "harmless to tissues."



It may be that your experience with Absorbine Jr. in ringworm therapy has been limited. If so, may we send

you a sample with our compliments? A coupon is printed below for your convenience. At all druggists — \$1.25 per bottle. W. F. Young, Inc., Springfield, Mass.

A FAMOUS LABORATORY SAYS:

"Absorbine Jr. in our tests, completely inhibited growth of the ringworm organism . . . and is harmless to tissues."

Absorbine Jr.

FOR YEARS HAS RELIEVED
SORE MUSCLES, MUSCULAR
ACHES, BRUISES, BURNS,
CUTS, SPRAINS, ABRASIONS



W. F. Young, Inc., 207 Lyman St.
Springfield, Mass.

Gentlemen: Kindly send me a sample of
Absorbine Jr. without obligation

Dr.

Address

initely greater expenditure of time and money.

When he finally is in possession of the coveted degree, he must immediately present a reasonably good front. People are inclined largely to judge his abili-



ty by the office furnishings, his professional equipment, the price-class of his car, and the pleasing personality of his—one or more—office assistants. Yes, it must be confessed that sometimes a man's ability as a physician is gauged by his capacity and willingness to spend.

The newer developments in mechanical and instrumental aids claim their share of the fee, and no small share either. Likewise, so rapid are the advancements of modern medicine that the doctor must devote time and money to the study of medical periodicals, besides maintaining a library adequate to meet his immediate needs.

To be sure, there should be a mutual benefit derived from the use of these developments and improvements of modern medical science. As the patient is helped physically, so should the doctor be helped economically. Since the medical practitioner, through his added knowledge and equipment is the better able to relieve suffering or effect a cure, he may rightly expect to receive a more just compensation.

The patient who becomes the beneficiary of this better service should be made to understand the reason for increased fees, and it becomes the duty of organized medicine to explain, in a positive and ethical manner, the facts given above.

It is my opinion that until such action is taken on a broad scale, criticism of the physician's charges and an undue blame of the high cost of medical care upon the profession will continue to rankle the harmony that should exist.

False dignity will get nowhere. Unless a business-like attitude is adopted toward this phase of public education, and the example set by means of our great industries followed, medicine will in the end be forced to bow to the inevitable—socialization.

Physician's Creed

By C. B. CAMPBELL, M. D.

A doctor's office is like a modern hospital. It should be dignified, home-like and quiet.

Every patient should be treated with consideration and respect.

Physician and nurse must give their undivided attention to each case.

Confidences received from patients should be guarded with scrupulous fidelity and honor.

Kindness and delicacy should characterize all acts of the physician.

Social and personal subjects must not be considered.

Make your office a dispensary of mental aid and physical help.

CURING THE SICK IS IN-DEED A DIVINE CALLING!

Let us send you
NORFORMS
 Mail coupon below



IN inflammatory vaginal conditions, physicians generally agree on the need for a vaginal antiseptic which remains in contact with the tissues for a sufficient period of time, yet is non-irritating.

Norforms (Vagiforms) are devised to meet this need. The formula is in a carefully prepared base

which melts quickly at body temperature. The active medication remains in contact with the tissues long enough to insure soothing and healing effects.

In treating such conditions as leucorrhea, vaginitis and cervicitis, you will find Norforms of value.

Let us send you sample boxes of Norforms. Fill out and mail the requisition blank below.

PHYSICIAN'S REQUISITION

THE NORWICH PHARMACAL COMPANY, Norwich, N. Y.

Send sample boxes of Norforms without charge or obligation.

Dr. _____

Address _____



Makers of Ungentine

Liable as a Partner

By ROSS DUDLEY

DO you engage in business "side adventures?"

So many business and professional men do that it is becoming a common practice for a man who has made a success in his own calling, to invest in some other line, frequently in a small business, and receive a share of the profits.

There are often some unexpected results from a legal angle, the possibility of which the physician should consider before engaging in these enterprises.

What is the physician's liability in a case like this:

Smith was a first class automobile mechanic and salesman, and a friend of a physician. Smith had an excellent location picked out to start an automobile business, but needed two thousand dollars capital.

The physician advanced the two thousand dollars under an agreement that Smith should operate the business; that no one should know that the physician was a part owner, and that after paying all expenses, they would divide the profits equally. It was agreed between the two that the physician should not be personally liable for any of the obligations of the firm.

A short time after the establishment was opened, Smith, while out on firm business, became in a hurry, doubled the speed limit, and crashed into another car. His reckless driving was the sole cause of the accident which permanently crippled the two occupants and ruined their machine.

The injured parties sued for ten thousand dollars damages. Their attorneys learned that the

physician was connected with the automobile business and made him a defendant.

Is the physician liable on the theory that he is a partner in the business, even if he was not actively engaged and was not present at the time of the accident?

Or, here is another frequent occurrence:

The new business did not prove a paying proposition. At the end of the first year the original capital was exhausted and the concern owed several thousand dollars in addition. The creditors learned that the physician had an interest in the establishment and sued him for all the debts. Is he liable?

It often happens that a business man becomes legally a silent partner, insofar as third parties are concerned, without actually intending to do so.

A partnership has been defined as an association of two or more persons to carry on, as co-owners, a business for profit. Thus, in the foregoing illustration, the physician became a silent or dormant partner in Smith's automobile business.

In regard to his liability in the damage suit, the third party can recover from him as well as Smith, as both partners are liable. As one supreme court has said on this question of law:

"The tort (wrongful act) of one partner is considered the joint and several tort of all the partners; and the partner doing the act is considered as the agent of the other partners when the wrongful act is connected with the business of the firm and is incident to it as the business is carried on; and any of the part-

ACID STOMACH

The New Colloidal Treatment . . .

*Form this acid adsorbing gel
in the stomachs of your
hyperacid cases.*



ALUCOL

(COLLOIDAL HYDROXIDE OF ALUMINUM)

Doctor, have you tried the newer and better colloidal way of treating acid stomach? Physicians who have found certain decided objections to the use of alkaline antacids are showing a preference for this new method. It involves the use of a non-toxic colloidal type of aluminum hydroxide, known as Alucol.

Alucol acts by forming a colloidal gel in the stomach by combination with any *excess of hydrochloric acid*. The stomach acid is not completely neutralized. Thus a continuance of proteolytic digestion is permitted. Further, Alucol cannot produce a systemic alkalosis as it is not an alkali and is not absorbed.

Alucol is indicated in cases of gastric secretory disturbances characterized by hyperacidity. Reports testify to its undoubted value in the treatment of gastric and duodenal ulcer.

Let us send you a trial supply, together with full literature. Use coupon below.

THE WANDER COMPANY,
180 North Michigan Avenue,
Chicago, Ill.

Dept. M.E.-2

Please send me, without obligation, a container of ALUCOL for clinical test, and brochure on "The New Colloidal Antacid."

Dr.

Address.....

City..... State.....

ners is chargeable civilly to the same extent to which his co-partners would be bound."

The liability further extends to cover the wrongful acts of employees, when engaged in the usual scope of their employment in the firm business!

In regard to his liability for the debts of the partnership, the rule is well established that a silent partner is liable for obligations contracted on the credit of the concern, within the scope of the partnership business.

As a leading law digest further points out:

"Under such circumstances the undisclosed or dormant partner may be held liable, after he is discovered, although the acting partner, at the time of entering into the transaction, represented that there was no partnership, and although the third party at the time of the transaction, supposed that he was dealing with and giving credit to an ostensible partner as an individual.

"The rule also applies notwithstanding the dormant partner did not sign the articles of copartnership; and regardless of the status of firm matters between the partners themselves, or of *private agreements* between them stipulating that they shall not be partners, or *purport to limit the liability of the dormant partner.*"

While the physician has a cause of action against the partner it is generally impossible to recover much from a person whom he has already had to finance.

As a practical proposition, when entering into a side business in which he is going to be a part owner and share in the profits, the physician should insist that a small corporation be formed, under which he is risking only the amount of money paid for stock and is not personally liable for the debts of the concern, or else that a limited partnership be formed.

Most states have statutes providing that a person may become

a limited or special partner by paying his investment in cash and by filing a certificate, containing required information regarding the partnership, with the proper public official. By conforming to the statute it is possible for one or more of the partners to limit his liability to the amount of firm capital that he has actually contributed.

AT AN ADVERTISED PRICE

WHEN the jobber or manufacturer of medical instruments or supplies advertises his products in circulars, pamphlets, display windows or otherwise to the medical fraternity at a stated price, can the physician rely, legally, on being able to purchase such supplies, at the price stated?

Here's a case that went to the Georgia supreme court:

The merchant was starting a sale and instructed a newspaper to advertise certain articles at \$15 each. Somehow the newspaper made a mistake and advertised the merchandise at \$5 each. The dealer sold forty-eight of the articles at \$5 each in accordance with the published price, thus suffering a loss of \$10 on each one, or \$480 on the lot. The dealer then sued the publisher for \$480 because of the latter's mistake in printing the wrong price.

The Georgia Supreme Court held that the merchant could not recover as he was under no obligation to sell to customers at the advertised price, saying:

"A general advertisement for the sale of an indefinite quantity of goods is a mere invitation to enter into a bargain rather than an offer to sell."

The legal distinction is this: If A says to B "I will sell you this article for \$5" he has made a definite offer to sell an identified chattel and this offer becomes a contract as soon as accepted by

This Syringe Does Not Stick or Leak

**Frees you of annoying backfire and
prolongs accuracy indefinitely**

If you are about to buy new syringes, note the offer below. We invite you to enjoy 10 days use of a syringe that does not stick, leak or back-fire.

The name is VIM SLOW-GROUND Emerald Syringe. Slow Grinding is a discovery important to every physician—a process in syringe-making that largely prevents the structural strains set up in glass by high speed grinding wheels. A process that gives you a syringe whose barrel and piston are fitted to an accuracy of one ten-thousandth of an inch.

Such accuracy of fit multiplies syringe life indefinitely—and gives you a smoothness in use that you have not known. A single VIM Emerald Syringe was used 18 months without developing leakage—a VIM Slow-Ground Emerald Syringe withstood 50 boilings at 212 degrees F. without reducing the pressure applied in making an injection.

As a consequence, thousands of physicians have come to adopt it. As they buy new syringes they are specifying VIM Slow-Ground Syringes to dealers. Thus they enjoy the smoothest action they have ever known—and largely eliminate excessive breakage and leakage. We invite you to try this Slow-Ground Syringe, and at our risk. Mail the Coupon below.

VIM Slow-Ground Emerald Syringes

MacGregor Instrument Company
Needham, Mass. M.E. 2-31

I want to try the VIM Slow-Ground Syringe (X) checked below and attach check to cover. If I am not satisfied, you are to return the full amount. Include a free copy of "New Advances in Technique" in the shipment.

- | | | |
|--------------------------|---------------------|--------|
| <input type="checkbox"/> | 2 cc. Regular..... | \$1.25 |
| <input type="checkbox"/> | 5 cc. Regular..... | \$2.00 |
| <input type="checkbox"/> | 10 cc. Regular..... | \$2.50 |
| <input type="checkbox"/> | 20 cc. Regular..... | \$3.00 |

Name.....

Address.....

My dealer is.....

B as there is a meeting of the minds and an agreement by both of the parties to the sale and purchase; that is, upon one an intention and offer to sell an identified article and on the other part an acceptance of such offer to sell the identified object.

However, if the jobber of medical supplies or equipment advertises a number of articles in a circular, pamphlet or in his display window, it is merely an invitation for any physician who reads the advertisement or sees the display to come into the merchant's store or to order by mail or otherwise such articles as the physician may desire and the supplyman may have on hand and desire to sell. The Georgia case states that the first essential of a sale is that there be an identification of the object to be sold and to make the contract there must be a meeting of the minds for the purchase and sale of the identified object, which generally doesn't happen until the physician tells the dealer that he desires certain articles and the dealer agrees to sell the doctor those articles.

The general rule is laid down as follows by the Georgia case and Corpus Juris, a leading law digest:

"A business advertisement published in newspapers or circulars sent out by mail, stating that the advertiser has a certain quantity or quality of goods which he wants to dispose of at certain prices, are not offers which become contracts as soon as any person to whose notice they might come, signifies his acceptance by notifying the other that he will take a certain quantity of them. They are mere invitations to all persons who may read them that the advertiser is ready to receive offers for the goods at the price stated."

In addition many jobbers state on their quotations "prices subject to change without notice," or "not responsible for unfilled orders" and in holding that there was no contract until the supply-

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man accepted and agreed to ship the order, another supreme court said:

"An invitation to prospective buyers to trade with the defendant, even when confined to a definite class (of customers) imposes no obligation on the sender of accepting any offer which thereafter might be received. The order of the prospective buyer does not ripen into a contract of sale until the sender's acceptance and then only as to goods specifically ordered."

Stakeholder

By LAWYER HAYWARD

IN May of a certain year, a doctor and B deposited certain money in a national bank.

"We're in a lawsuit over this money; we want to leave it here till the suit's decided, and then you're to pay it to the winner," they stated and the bank accepted the money.

In June the bank failed.

In July the court decided in favor of the doctor and he promptly demanded the cash.

"The bank's paying about 20 cents on the dollar," the receiver told him.

"That might apply to the general creditors, but this was a special deposit, and must be paid in full," the doctor protested.

"Was there any agreement that this money was to be kept separate from the general funds of the bank?"

"There was not."

"As there was no express agreement that the deposit should be considered a special one, and nothing from which there may be found an implied agreement to that effect, it must be held that the deposit was a general one," said the U. S. District Court in ruling against the doctor.

more than
7,000
PHYSICIANS

have requested a full size package of

NATURALAX

In answer to the advertisement which appeared in the December issue of this publication. Requests are still coming in for an 8-ounce tin of NATURALAX —thoroughly cleaned, selected psyllium seed of the highest quality — the natural regulator which combines both bulk and lubrication.

These full size packages of NATURALAX are being sent out as rapidly as possible. If you have not returned the post card which was incorporated in the advertisement, send it now— or write today requesting a tin of NATURALAX free of charge so that you can make your own test of this harmless and effective natural corrective for intestinal stasis.

Address

LANMAN & KEMP, INC.
135 Water Street New York, N. Y.

NATURALAX

"Everyone carries around an Internal Combustion Engine"

is the phrase of a certain lecturer on physiology, used to describe the human digestive system. Combustion, i. e. digestion, of food, especially of the heavy type usually eaten during the winter, results in waste. Waste, which instead of being innocuous is prone to undergo excessive fermentation and putrefaction, and if not thoroughly and promptly eliminated produces autointoxication and toxemia. Absorption of such toxic and irritant waste, circulates it all over the body, irritating the cells, reducing their vitality and resistant properties, contaminates the blood and favors attacks by disease.

MORAL—

clean out the intestinal canal regularly and thoroughly and keep it clean. Counteract the tendency of such cases to increased acidity.

MEANS—

HALEY'S M-O

AN EMULSION OF MILK OF MAGNESIA & PURE MINERAL OIL

is lubricant, laxative, antacid, toxin-solvent, emollient, easy to take, and effective in action.

It persuades instead of forces the bowels to function normally. It counteracts hyperacidity and helps to restore normal functional activity of intestinal muscles and mucous membrane secreting cells. Not only in spastic constipation, intestinal stasis, constipation and autotoxemia, but Haley's M-O should be prescribed for oral-gastric or intestinal hyperacidity, indigestion, gastralgia, pyrosis, intestinal fermentation, colitis. In hemorrhoids or any genito urinary condition when a soft, easy bowel movement is required. Before and after operation. During pregnancy and maternity. In infancy, childhood and old age.

It is an antacid mouthwash.

Liberal sample and literature sent on request.



THE HALEY M-O CO., Inc.,

Geneva, N. Y.

Charge It

AN INNOCENT LITTLE RACKET PLAYED
BETWEEN FRIENDS. By AN EASY MARK

A GREAT deal has been written about the doctor's financial problems, without, to my knowledge, ever touching upon the following interesting little pit-fall.

When I first started practicing, I located in a town where my father's family had grown up. He was known as a man of his word; had unquestioned credit, but was never a man of wealth. He paid all of his obligations promptly, and when he could not afford a thing, he went without. We also had charge accounts everywhere and those accounts were of the highest rating, because they were not abused.

So much for the background.

After I had been in practice about five years and was getting well established, my wife and I became close friends of a couple who had moved from New York to the "country."

After knowing them for about two years (they had moved to our town because of influential social connections and, all in all, those connections proved very advantageous to my practice) the woman confided to us that her husband was a "cash" man, and would not allow her to have any charge accounts. This situation, she said, often proved difficult for her; many times the clothes she had purchased did not fit, necessitating another trip into the city, at expense and great inconvenience.

Knowing that the woman's husband always paid cash, that he had a very fine salaried position and that they lived much more

luxuriously than we could afford, we told her that she could charge her purchases on our accounts, which she promptly did.

Forthwith, on the first of each month, bills from four different stores where we had accounts, varying in amounts from \$8 to \$100, began to pour in on us. These bills were always paid, but not so promptly as we were accustomed to pay our own much smaller debts. Furthermore, it became necessary to go through an elaborate process of checking up bills, as to what items were hers, and what ours. We soon made the unpleasant discovery that, although they were good for the amounts charged, they were not people who practiced paying bills promptly.

Here we were, on close friendly and social relations with the couple, and with many good patients coming to me through them! Yet what had been offered as an occasional help to them was now being used recklessly for everything, evidently on the impression that by making our bills larger at the various stores, they were doing us a favor.

Luckily, we never lost a penny by the arrangement, but our accommodation became an increasing nuisance. So much so, that my disposition was getting touchy. Around the first of each month, when the bills were due, I felt myself getting peevish and aggrieved, as if I had been singled out as a particularly easy mark. I not only did not care for such distinction, but felt sure that my case was quite an exception. It actually made me feel more sym-

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PSORIASIS
RING WORM
HEAD SCALDS
ATHLETIC FOOT
AND OTHER
SKIN DISORDERS**

Manufactured under the personal supervision of a pharmaceutical chemist

1. "Congratulations on Mazon. Have tried everything on one case without results. Your samples cleared it up."
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2. "I have a relative who is a victim of Psoriasis, has been for 25 years. I never found anything that started the trouble on the 'fade-away' as quickly as did Mazon."
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Professional Sagacity Pruritis - - Origin

Pronounced itching, associated with skin disorders, may be temporarily relieved with counter irritants.

Attack the origin and instantly relieve the itching with this modern scientific preparation:—

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a combination of Phenolic substances and organic mercury compound in a greaseless base.

THE ACTION OF MAZON
REFLECTS TRUE SCIENTIFIC RESEARCH.

Exact Your Own Proof

Guard Against Spurious Imitations

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M.E. 2

Gentlemen: Please send me trial supply of Mazon.

Dr.

Address

City..... State.....

pathetic toward those patients who assured me that their particular symptoms were unique and that no one else had ever had the same—quite!

It happened that another friend occupied an executive post in the credit department of one of the largest retail stores. I confided in him and he assured me that there were other easy marks—even easier than I. To prove it, he let me listen in to a few conversations across his desk. They ran something like this:

Customer No. 1—"I went to Florida last January and have been gone three months. There is \$125 charged on my account that doesn't belong to me. My house has been closed during my absence."

Customer No. 2—"There is \$50 charged on my bill, not mine. Please close my account. This has happened too often."

Customer No. 3—"There is \$75

credit on my account, and I'd like the cash instead of the credit. You see, I have a bridge account to pay."

(I couldn't believe my ears.)

And then Customer No. 4—"I allowed a neighbor of mine to charge on my account for one month and it has now gone three months and she hasn't paid me. Please close the account in my husband's name and put it into my maiden given name."

These few examples are enough. Too, the request of Customer No. 4 gave me the needed idea. Our account was closed, and reopened under my wife's maiden name. The proper excuse was made, and the matter closed with everybody happy.

The morals are two:

Just one more racket to dodge, no matter how sincere or influential the "friends" are.

Doctors aren't the only people who have credit troubles. Department stores have them too!

Speaking Frankly

[FROM PAGE 7] truth of Dr. Kuegle's article as our young physicians do that are practising in large cities. Here we feel the ambitions of these pioneers in surgery more than anywhere else, I believe. Jealousy is so conspicuous that the ordinary layman openly comments on it. Some of the older men resort to all types of sharp practice to retain their leadership.

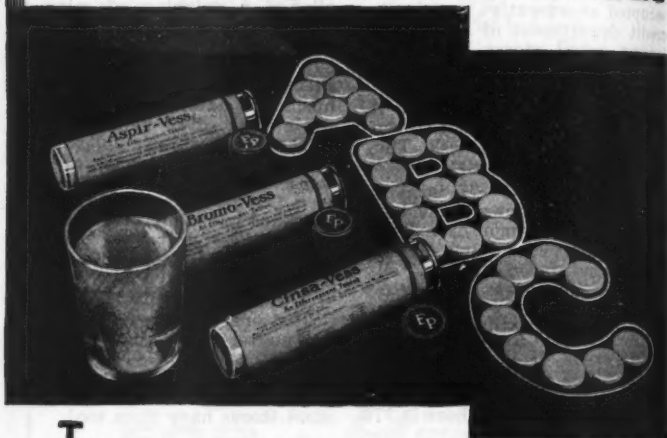
Here are a few examples: ward privileges to only staff men of "surgical ability," and *they* determine who has ability; closed staffs in certain hospitals, thus retaining a small surgical staff in the hospital; when called in consultation by younger surgeon,

failing to agree with the younger practitioner, even though the latter is one hundred per cent right; refusing to co-operate with the younger surgeon in contract and industrial cases.

The above practices are just a few. If space would permit I could mention many more and give concrete examples in each instance.

May I add to Dr. Kuegle's answer, where he says "there is but one remedy for this menace of State Medicine, and that lies in the direction of an equalized fee schedule." This is very true, but first let the medical profession purge itself of some of these autocratic leaders, some of whom are inclined to promote their own welfare in preference to helping the profession as a whole. We find this type of men today at the head of some of the largest medical societies and organizations in the country. [TURN THE PAGE]

MORE EFFECTIVE MORE PALATABLE



THE two most important things in giving any form of drug medication are—maximum potency combined with palatability.

These features are now being incorporated into the formulae of standard medicaments by the association of the CO_2 vehicle—in other words, standard medicaments presented in an effervescent form.

We introduce to you these three products—

Aspir-Vess Bromo-Vess Cinsa-Vess

These effervescent tablets dissolve quickly, yielding a clear, sparkling, carbonated solution which is most palatable. The active principles are diffused rapidly in the stomach, which enables full dosage to be given without gastric disturbance.

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Aspir-Vess contains 5 grains of aspirin in an effervescent alkaline medium.

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The systemic alkalinizing effect exhibited in each product greatly enhances the therapeutic value of the formula.

ASPIR - BROMO - CINSA - VESS

Please send me, free, a tube of.....

Dr. Address Dept. M.E.1

Now, coming back to the second article, "Hospitals," that is so full of truth I really became infatuated with it, even to the extent that I am going to have a copy made and placed on my reception room table for my patients to read.

I think that that article is one hundred per cent right. I sincerely believe that you can go into the medical wards of any hospital of the present day, look over the clinical records of all the patients, and find, in seventy-five per cent of the cases, that there is not a thing being done for these patients that can't be done at home.

These cases are sent to the hospital for one or all of the following reasons: to furnish revenue for the hospital; to increase the service of the attending physician; or because the physician is either too ignorant or too lazy to care for the patient at home, most likely the latter.

If the daily newspapers would lend some of their front-page columns to just such facts as are stated in this article, and teach the public that hospitalization is not necessary in most instances; also to teach them to use their own head in just such cases as the one mentioned in this article (fractured hip), they would do far more good than they do by condemning the entire medical profession.

The public have grounds to complain of the present high cost of medical care and the medical profession is not at all free from fault in this matter. I believe that if the medical profession as a whole would take these two little articles into consideration and try to eliminate the things mentioned, that we would soon note an enormous improvement in the public's sentiment toward the medical profession.

So, Mr. Editor, give us some more good articles on these subjects.

Wm. H. Kenner, M. D.,
Contract Surgeon, U. S. Army.

Ferment

TO THE EDITOR:

I read with great interest the article by Dr. Roland G. Breuer in November MEDICAL ECONOMICS. Undoubtedly there are many physicians who want to go to California but are afraid to make the break because of the fear of leaving a paying practice for an uncertainty.

I visited California in 1924 and again in 1925, with the intention of locating, but returned home after about two months visiting time. For a while I was satisfied, but each year the longing to return has grown stronger, and I have often wished I had never seen the state. There is no doubt that once one goes out there, there is instilled in him a dangerous ferment that works here to make him more dissatisfied with his own home location.

I had a good practice here (in Alabama) and am doing well—but that same something which has sent millions to the West Coast is working on me pretty hard; I will never be satisfied until I make the move.

My impression has always been that the great number of doctors moving to California has made every field of medicine over-crowded, but Dr. Breuer's article is encouraging on these points.

J. S.

Mid-west

TO THE EDITOR:

I have just finished reading Dr. Breuer's story about California; I enjoyed it! Born in San Francisco, I left that town behind and went to St. Louis to finish my medical course, later interned in the same city, married a native Missourian, and finally settled down—took the city to my heart and loved it.

That was back in 1919, and I am now located in a small town of 1900 population in Southern Illinois, a place of largely retired ruralties, around us the gumbo of the Mississippi bottoms, the blue denims, the four-buckled

The Standard Effervescent Saline *since 1895*



SINCE 1895 Sal Hepatica has been the approved laxative and cathartic for flushing the intestinal tract and for promoting internal purification, without creating a condition of tolerance.

It is also the ideal treatment to alkalize the system. It is efficient, palatable, reliable and a preparation that the practitioner can well recommend. We will gladly send you samples for professional use.

Sal Hepatica

MEMO to my

assistant: Send to Bristol-Myers Co., 75 M West St., New York, for a professional sample of Sal Hepatica (gratis).

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City _____ State _____

shoes, the hungry furnace, "the howling blizzard and snow-blocked roads."

Do I like it? Well, at times I long for the land of perpetual sunshine, the clear skies, and oh—just a view of the vast Pacific, its blue waters stretching off to lands o' dreams, the white surf beating against the rocks out near the Cliff House, why even a little earthquake wouldn't be so bad.

And yet I love the country back here. Here one lives in the real U. S. California seems so far away from everything, though of course the radio and airplane have done much to cut down this idea of distance, but back in my day I felt so isolated from the rest of the country. I dreamed of Chicago and what it looked like, longed to see a World Series game instead of merely reading about it. Now I have a Big League team at my back door, but way down in my heart I long to go home. Just as Dr. Breuer misses the storms and the snow, and his old patients, so do I miss the monotony and the sunshine, the flowers, the peacefulness of California.

And yet I have often wondered how physicians make a living out there with four medical schools turning out about fifty graduates yearly, and reciprocity bringing the middle-westerners in carload lots every six months. It is rare to see a California graduate taking a state board outside the state. Where do they all find the price? And with California such a healthy place to live! — T. G. H.

Incomes

TO THE EDITOR: I have not filled in your post card questionnaire on medical incomes, but instead send you this letter.

My reasons for not returning the questionnaire are numerous. Here are just a few:

1. The absolute impossibility of getting any large body of people to take questionnaires seriously. I have been personally present when those filling out such

blanks have said, for example: "By Jo, I'll give them a good one. I'll tell them I'm making \$15,000 yearly." A joke of course, but not so taken by those who receive the return.

2. The impossibility of getting even those who accept the questions seriously to tell the truth in their answers. Physicians almost habitually exaggerate the size of their incomes—except, no doubt, to the Internal Revenue Department. You have, of course, heard of people (not so very few in number either) who tell certain things until they come to believe them themselves.

3. Those who are making the smallest incomes will either distort their returns the most, or will, in the largest percentages, refrain from answering. The fact that signatures are not required on the returns will affect these actions little. Such is human nature.

4. I take it that the most important matter about this Survey is the light it is expected to shed on the question of whether there are or are not too few physicians produced yearly by the medical colleges of the United States—whether, in other words, there is under-or over-competition among doctors. Yet, on that head, your returns will be practically worthless.

(A) Take, for one thing, the very large number of physicians who are listed in the main part of the American Medical Association's Directory as "not in practice." Retired! None of these doctors, I necessarily assume, will be included among those who will receive, fill out and return your questionnaires, for they have no medical incomes whatever, as a matter of course. Yet, in truth, a very large number of these "retired" physicians have not so much "retired" as merely "quitted"—been squeezed absolutely out of the profession by the very intense over-competition prevailing in it. Any accurate showing on the economic point in question, however, would, of

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M. D.

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course, have to include these squeezed-out members. Yet they will not, even cannot, be shown, for the simple reason that the squeezed-out and the really retired, of those "not in practice," cannot possibly be distinguished from each other—even if you really did include "retired" physicians in your survey and really did attempt to discriminate the one kind from the other.

(B) At the back of the A. M. A. Directory you will find a list, which runs to several thousand, of "Physicians Whose Addresses Are Unknown." The great majority of these names are those of men who, unable longer to exist as doctors, have left for parts unknown and gone into other than medical occupations. Not physically dead, you understand, of course, just deceased professionally.

5. But, aside from all these highly important matters, there yet remains by far the most important of all. How much of the combined income which the returns from all your questionnaires will bring back to you is absolute "water"—i. e., the result of mere "fake" practice—unnecessary calls and unnecessary operations, or of small operations talked into an appearance of big ones. That point you never can know. Of course you can't. Yet it is the biggest point in the list. Many (of course not all) physicians who cannot live on the proceeds of their practices, when these are properly conducted, proceed to conduct them improperly, compel them by sheer humbuggery to become profitable. And in the extent of that padding-out of incomes by mere fakery lies the chief, though by no means the only) answer to the great question, "How much over-competition really exists at the present moment in the practice of medicine?"

One word more. I am sixty-four years old. It is, therefore, so far as concerns my own financial prospects, not of the least importance whether the number of

young persons hereafter admitted to the medical schools is large or small. Five years would necessarily elapse before these neophytes could possibly receive even their medical degrees. A year or two more would elapse, necessarily, before they could be made into eye-specialists. Still more years would have to elapse, as a matter of course, before they could establish reputations and practices and so become of the slightest appreciable competition with myself.

Long before the expiration of all those years I should myself have joined the ranks of those who are "not in practice"—at least upon this planet. But I should, indeed, be glad to know, before I leave this mundane sphere, that the economic pressure in the ranks of the medical profession had at last been taken note of by the medical schools of this country and that my younger brethren by Hippocrates would, in consequence, be given a better opportunity to do straight, clean practice for humanity, and still, at the very same time, to make a more comfortable living.

You are perfectly welcome to print this letter, just as it stands, in MEDICAL ECONOMICS. In fact I think you ought to do so.

Thomas Hall Shastid, M. D.

The Doctor and his Investments

[FROM PAGE 21] weak technical position. A recent survey shows that the decline of the Dow-Jones composite average, which includes many blue chip stocks, declined from the 1929 peak to the 1930 trough, to the extent of 55%; meantime, thirty representative discretionary investment trust stocks declined 76%; eighteen fixed trusts declined only 47%. The superior performance of the fixed trusts is due in part to

A new synthetic of startling potentialities

Completely eliminates the putrefactive flora
of the intestines

RESearch has developed an entirely new intestinal antiseptic which completely destroys the putrefactive flora of the intestinal tract with great certainty and regularity . . . which possesses over 100 times the bactericidal power of phenol at body temperature . . . and which is non-toxic in therapeutic doses!

This remarkable chemical is DI-HYDRANOL.

DI-HYDRANOL is absorbed from the intestines only to a small extent; it therefore exerts its full germicidal activity throughout the entire alimentary canal. In passing through the canal it destroys the putrefactive bacteria through a highly selective bactericidal action.

In a series of controlled tests it



was proved that DI-HYDRANOL eliminated completely the putrefactive organisms of the intestines in every case in from two days to an extreme of forty-one days.

A booklet with more information will be sent upon request.

Philadelphia— Sharp & Dohme —Baltimore

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(2,4 dihydroxyphenyl n-heptane)

their relatively small holdings of rails, which had a tremendous decline, and also to the fact that they selected a higher grade of stock than was included in the Dow-Jones averages, which include a number of highly speculative issues which had a bad depreciation.

On the basis of their superior performance, fixed trust stocks have been the most popular of the vehicles for investment by proxy in recent months.

The fixed trust, of course, is merely a device for selling the public participation in a group of standard listed stocks. The investor pays a premium to cover the profit of the dealer and the selling expense. The investor with \$3,000 or more can make up his own fixed investment trust by buying one or two shares of the same stocks that the fixed trusts appear to specialize in. A survey of the portfolios of twenty fixed type investment trusts show that American Telephone and Telegraph is the most widely held stock, having been selected by each of the twenty trusts. The twenty-seven most widely held stocks, on the basis of such portfolios, with the number of times each appears, are:

Stock	No. times appears
American Tel. & Tel.	20
National Biscuit	19
N. Y. Central	19
U. S. Steel	19
General Electric	19
Con. Gas	18
duPont	18
Standard Oil of N. J.	18
Westinghouse	17
Atchison	16
Pennsylvania	16
Woolworth	16
International Harvester	16
American Tobacco B	15
Eastman Kodak	15
Otis Elevator	14
Union Pacific	14
Standard Oil of Calif.	13
Texas Corporation	13
Western Union	13
United Gas Improvement	13

Illinois Central	12
Southern Pacific	12
Ingersoll-Rand	12
Standard Oil of N. Y.	11
Borden	11
Union Carbide	10

In addition, American Can, Allied Chemical, Canadian Pacific, Louisville & Nashville, American Radiator, United Fruit, and North American Company, each appear eight or nine times.

The real test of the discretionary trust whose management has great freedom in buying and selling securities, is whether they perform better or worse than the market as a whole. A Philadelphia investment house has made a careful study of the records of investment trusts and it concludes: "The totals of the figures studied show that the composite asset value of the 38 companies surveyed declined, to June 30, 1930, only 3.55% compared with a 20% decrease in market averages (or a shrinkage in the market nearly six times greater than that suffered by management type trusts) during the period. The difference of 16.45% represents the savings due to superior management.

"From the above study, it is obvious that leading management type investment trusts have made more money during a period of rising stock prices and have lost less during a period of falling stock prices, than the market averages. They have done better than average due to superior management ability and constant supervision of investments. This successful record of accomplishment by American investment trusts of the management type is a duplicate of the record of English trusts for several decades. Constantly and surely, the campaign promises—that management trusts through able management and skillful supervision of investments would do better than average (or the individual)—is being fulfilled.

"Management trust stocks are currently selling at a discount

FOR THE DIABETIC DIET

... things that do good and taste good

KNOX Sparkling Gelatine can be of genuine service to the physician who is looking for ways to keep diabetic patients on their diets.

Knox Gelatine supplies a satisfactory bulk when combined with the small quantities of basic foods and builds up a dish to hunger-relieving proportions. In addition, the variety of foods which may be made with Knox Gelatine is a key to constantly changing dishes that are attractive to the eye and good to the taste!

In prescribing gelatine, however, it is essential to avoid any brand that is ready-sweetened,

flavored and colored. A gelatine of this kind will contain as high as 87% sugar. Knox Gelatine is unflavored, uncolored, and *entirely free from sugar*, permitting it a valuable place on the diet.

One of the booklets prepared by Knox is on "Diet in the Treatment of Diabetes". It contains various ideas and recipes for the preparation of beneficial dishes which will be helpful to the physician, and satisfying to the patient. This booklet will be sent to you in any quantity you desire upon receipt of this coupon.

AN EXAMPLE of satisfying Knox Sparkling Gelatine dishes to satisfy the Hunger-Feeling of Diabetic Patients is shown here—even to a confection for diabetics.

WINTER SALAD

(Six Servings)

	Grams Prot. Fat Carb. Cal.			
2 teaspoons Knox Sparkling Gelatine	4.3	4	..	..
1/2 cup cold water	..	..	..	..
1/2 cup hot water	..	..	..	..
1 teaspoon salt	..	..	..	..
1 cup vinegar	..	..	..	..
1/2 cup grated cheese	120	43	54	..
1/2 cup chopped stuffed olives	70	1	19	..
1/2 cup chopped celery	60	1	..	..
1/2 cup chopped green pepper	25	..	..	..
1/2 cup cream, whipped	75	2	30	..

Total 51 108 13 193
One serving 8.5 17 2 197

Soak gelatine in cold water. Bring water and salt to boil and dissolve gelatine in it. Add vinegar and cut aside to chill. When nearly set, beat until frothy, fold in cheese, olives, celery, pepper and whipped cream. Turn into molds and chill until firm. Unmold on lettuce leaf and serve.

DIABETIC CHOCOLATE CANDY

	Grams Prot. Fat Carb. Cal.			
1 tablespoon Knox Sparkling Gelatine	7	6	..	..
1 oz. shredded chocolate	39	6	35	..
1/2 teaspoon cinnamon	..	..	..	..
1/2 cup cream	55	1	23	1.5
1/2 gr. saccharin	..	..	..	..
1/2 cup water	..	..	..	..
1/2 teaspoon vanilla	..	..	..	..
1/2 cup chopped walnuts	30	6	29	4

Total 117 26 14.5 620
One serving 6 16 9.1 110

Soak gelatine in 1/2 cup water five minutes. Mix together and melt the chocolate, cinnamon, saccharin. Add the cream slowly stirring constantly. Then add the water. Add the gelatine. Remove from fire, add the vanilla. Cool the mixture and as it hardens stir in the nuts. Turn the mixture into buttered tin. When hard, cut into slices ready for serving.

KNOX *is the real* GELATINE

IF you agree that recipes like the ones on this page will be helpful in your diabetic practice, write for our complete Diabetic Recipe Book—it contains dozens of valuable recommendations. We shall be glad to mail you as many copies as you desire. Knox Gelatine Laboratories, 448 Knox Ave., Johnstown, N. Y.

Name.....

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State.....

averaging about 25% below asset value. In view of their accomplishment record, as explained above, this discount is not justified and will probably not continue for any length of time."

The foregoing dealer may have selected companies that did better than the average. Nevertheless, bad as the record in the lower grade trusts has been, their current market prices more than reflect all the bad news. Accordingly, the investor with fresh funds available, can and should seek a new orientation with respect to investment trusts. He can act on the assurance that this is a better time for making such commitments than during the recent inflation. Moreover, he can feel safer in buying shares of well-managed and honestly conducted investment trusts at a discount than when they are selling at a substantial premium above asset value.

The investment principle has been adapted by three of the principal trust companies in New York, which conduct investment funds for the public. Such funds, and well managed investment funds generally, give the investor an opportunity to buy the market as a whole, when and if he thinks that conditions are right.

Ups and Downs

In view of the widely expressed belief that the economic readjustment will be completed this year, it behooves the investor to re-examine his portfolio and make sure that the remaining capital is invested in accordance with his needs and opportunities.

President Hoover has used the prestige of his office to quicken the Eastern railroad merger as a rallying point. Although the immediate earnings exhibit of the railroads is far from favorable, the drawbacks to commitments in

railroad securities have been—to say the least—fully discounted at the market place.

Among important financiers, I find general confidence that the business cycle has not been adjourned, and that recuperation from the present major depression is not only feasible, but likely to begin in the near future. Many think, however, that the rate of recovery will be slow, and that fully normal prosperity is not to be expected before 1932. Meantime, there is a growing belief that the cycle can be facilitated if all groups take their dose of deflation instead of trying to hold it off.

Installment selling, it appears, exaggerates peaks of prosperity and intensifies troughs. In good times, people, by virtue of the installment plan, are able to buy more than they otherwise could. Likewise, in times of depression, when confidence ebbs, there is a disposition to cut down on installment purchases and pay off pending debt. A hopeful sign lies in the fact that considerable progress has already been made in paying off old debts.

Leading economists criticize the Administration for lack of boldness in plans for public improvements. They urge that expenditures for emergency Federal public works be raised to \$1,000,000,000. In their joint statement, the economists assert: "The cost cannot be compared to the loss sustained by all classes of the nation if such expenditures are not made. Taxation for such projects, equitably distributed, would not be seriously felt by any group. It is difficult to understand the timidity in this crisis, of business men and legislators. The need of the hour is courage to act along the lines of long-established economic principles. The time has come to test them on some adequate scale."

Literature and Samples »

LIGHT THERAPY WITH THE HI-ARC: A 68-page booklet, with a four page bibliography and a number of helpful charts and illustrations. Copies are offered by the Liebel-Flarsheim Company, 303 West Third Street, Cincinnati, Ohio.

A CASTOR OIL CATECHISM: Questions and answers on an old standby, with emphasis on the advantages of the tasteless product. Samples of Kellogg's Tasteless Castor Oil are also offered. Write: Walter Janvier, Inc., 121 Varick St., New York City.

SAMPLES OF HEINZ BREAKFAST WHEAT: Packages of this cereal food, with literature on Heinz Vegetable-Cellulose, are offered by the H. J. Heinz Company, Dept. M. E., Pittsburgh, Pa.

PATIENT'S CHART: This is something different in a guidance chart, with spaces for diet, exercise, appointments, etc., to be filled in by the physician. A supply can be obtained from Olajen, Inc., 451 West Thirtieth St., New York City.

KARO SYRUP FOR INFANT FEEDING: The nutritional information in this booklet is intended for physicians only. Write: The Corn Products Refining Company, 17 Battery Place, New York City.

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THE BOOK ABOUT BATHS: Nothing just like this has ever been published before. It is meant for patients, and is a useful ad-

junct to the physician's advice. Copies may be had by writing the Cleanliness Institute, 45 East 17th St., New York City.

FOXGLOVE FARM: A recently published booklet describing a new mode of stating the strength of digitalis. For a copy write: Upsher Smith Co., Sexton Building, Minneapolis, Minn.

THYMOPHYSIN: Descriptive literature on this product, of use in endocrinology and obstetrics, together with samples, is offered by the American Bio-Chemical Laboratories, Inc., 235 Fourth Avenue, New York City.

THE TREATMENT OF HEMORRHAGE: A thirty-two page booklet covering all forms of bleeding, with therapeutic notes on the use of Ceanothyn. Write: Flint, Eaton & Co., Decatur, Ill.

MEDICAL DATA: A compact circular giving, in abstract form, descriptions of the composition and application of three products made by E. Tosse Co., Inc., 33 35th St., Brooklyn, N. Y.

NEW PORTABLE SOUND MOVIE EQUIPMENT: Physicians who are following the development of medical movies for educational purposes will find this reprint of interest. Write: Bell & Howell Company, 1801 Larchmont Avenue, Chicago, Illinois.

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Control from Forest to Pharmacy

The preference displayed by so many physicians for *Natural Salicylates (Merrell)* is based on a record of clinical performance over a period of half a century.

Rigid control of every step from forest to pharmacy has resulted in the perfection of a product of such chemical purity that it can be guaranteed to give maximum therapeutic response with the very minimum of gastric disturbance.

So well tolerated are Merrell Natural Salicylates that massive doses can be administered during the earlier stages of intensive treatment, without producing objectionable by-effects.

To be positively sure of obtaining the true, unadulterated sodium salicylate, prepared solely from the true birch oil, many physicians protect themselves and their patients by carefully specifying

"Merrell's Natural Sodium Salicylate"

Frequently it is found desirable to combine alkali medication with salicylates.

For your convenience in prescribing such a combination, the Wm. S. Merrell Co. announce the introduction of

ALYCIN





A Combined Attack

The newer thought in salicylate medication favors a dual method of attack on rheumatism and arthritic conditions.

It is found that the concomitant administration of an alkali helps to neutralize the acid toxins of the bacteria of rheumatism and at the same time tends to lessen the cardiac dilation associated with rheumatic disorders.

Among the various outstanding authorities who have

emphasized the importance of this combined treatment are Osler, Hanzlik, Lees (D.P.), Danielopolu, Caussade and Tardieu, Peters (J.T.), etc.



The introduction of Alycin enables you to prescribe natural salicylate with a balanced alkaline base thus providing a more effective and safer method of alkalization than is possible with single alkalis.

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INTENSIVE DOSAGE

A rounded teaspoonful of Alycin represents 20 grains (approx.) Merrell's natural sodium and magnesium salicylates combined with 40 grains (approx.) of a balanced alkaline base.

To calculate the first day's dosage, multiply the patient's body weight by three and give that number of grains, in divided doses. For example: For a patient weighing 160 lbs., the first day's dosage of Alycin should approximate 480 grains. This may be conveniently divided into eight 60 grain (teaspoonful) doses at two hour intervals, taken in a glass of water.

After the first day's intensive treatment, the dosage can be reduced to one teaspoonful of Alycin daily.

Alycin is issued in $\frac{1}{4}$ -lb. and 1-lb. bottles.

THE WM. S. MERRELL COMPANY
Cincinnati, Ohio

ALYCIN





A New Method of Combating Infection

The principle of detoxification with Soricin (purified sodium ricinoleate), first enunciated by Larson, has been amply confirmed in dental practice.

Now as a result of two years' investigation by Morris, Dorst and others, the same principle of detoxification with Soricin has been applied to the intestinal tract. Their clinical studies show that Soricin Capsules, when given by mouth, afford prompt relief in colitis and other diseases of the intestinal tract.

The value of Soricin is based on its ability to render pathogenic organisms non-pathogenic, and to detoxify their toxins, thus preventing secondary infection.

If you are anxious to confirm the value of Soricin in intestinal conditions, let us send you a full size box of 40 Soricin Capsules, sufficient for ten days' treatment, together with complete information.

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Tours and Cruises

FOR PHYSICIANS AND PATIENTS

WINTER IN NEW ENGLAND: This annual folder presents New England in her most attractive form, with a list of winter carnivals, and of places to stay, including rates. Write: The Boston and Maine Railroad Travel Bureau, North Station, Boston, Mass.

NYK JAPAN MAIL: This folder is one of the most striking examples of modernism adapted to advertising literature we have seen. From NYK Line, 40 North Dearborn St., Chicago, Ill.

1931 SAILING SCHEDULE: A number of Mediterranean itineraries arranged under the direction of the Travel Institute of Bible Research, Inc., Bible House, Fourth Avenue and Ninth Street, New York City, and obtainable from that address.

TO CALIFORNIA: A 96-page travelogue, from Chicago to California, via the Santa Fe. Write: W. J. Black, A. T. & S. F. Railway System, Chicago, Ill.

THE IMMORTAL SHRINE: 60 pages, colorfully bound, dealing with Stratford-Upon-Avon, by A. K. Chesterton. It bears the price of sixpence each, but we understand it is offered gratis by the London, Midland, and Scottish Railway, 200 Fifth Avenue, New York City.

IRELAND: This travel guide to the Emerald Isle is more than half an inch thick. From: G. S. Railways of Ireland, 200 Fifth Avenue, New York City.

THE RIVIERA DI LEVANTE: Only a few pages, but interesting; it deals with the country east of the Riviera. Write: The Compagnia Italiana Turismo, 545 Fifth Avenue, New York City.

HAWAII, ROMANTIC, BEAUTIFUL: This booklet has just been issued; it has a lot of Hawaiian pictures we have not seen before. Write: The Matson Line, 215 Market Street, San Francisco, Calif.

MANILA, THE SOPHISTICATED CITY: The cover of this pocket-guide shows a curious brand of art, but once inside, you find some real information. Write: The Philippine Tourists Association, Manila, P. I.

YOUR 1931 HOLIDAY: A pamphlet listing all events of importance to be held in Great Britain and Ireland during 1931. Write: The Travel Association of Great Britain and Ireland, 1 Pall Mall East, London, S.W.I., England.

TO NOVA SCOTIA AND NEW-FOUNDLAND: Itinerary of a 12-day cruise from New York, which is both inexpensive and unusual. Write: Furness Red Cross Line, 34 Whitehall St., New York City.

RUN AWAY FROM WINTER: Among other things, this booklet tells you how to spend one month in southern California, and what it will cost. Its illustrations are beyond comparison, and the printing is in rotogravure. Write:

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Too often, it seems, the very foods which are so abundant in vitamin and mineral elements are those which the average child finds distasteful. That is why Ovaltine—the delicious Swiss food-drink—is proving so valuable in the treatment of undernourished and underweight youngsters.

You will find that the children respond very quickly to Ovaltine—because they like it and do not consider it a medicine. It is especially recommended for between-meals refreshment, because it actually aids in the digestion of other foods.

And for the older patients—Ovaltine is just the right drink before retiring.

Let us send you a regular size package of Ovaltine for trial in your own home.

OVALTINE

The Swiss Food-Drink

*Manufactured under License in U.S.A.
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THE WANDER COMPANY,
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Dept. M. E. 2

Please send me a regular size package of Ovaltine, FREE.

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The All-Year Club of Southern California, 1151 South Broadway, Los Angeles, Calif.

HOW BEST TO SEE THE PACIFIC COAST: A practical booklet on sightseeing by train, describing four great scenic routes. Write: The Southern Pacific, San Francisco, Calif.

THE CANADIAN NATIONAL ROUTE TO THE WEST INDIES: About the service connecting Halifax and St. John with Bermuda and the British West Indies. Write: Canadian National Steamships, 384 St. James St., Montreal, Quebec.

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VIRGINIA, THE BECKONING LAND: Ask the Virginia Commission on Conservation and Development, Richmond, Virginia, to send you a copy of this folder, which includes an enormous tourists' map with a number of suggested itineraries.

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AGWI STEAMSHIP NEWS: This little travel magazine is issued cooperatively by several steamship lines. Copies may be had by writing Agwi Steamship News, 1702 Chanin Building, New York.

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ST. JOHNS, NEWFOUNDLAND: Where to go, what to do, and what to see, in that historical north country. Write: Newfoundland Tourist and Publicity Commission, St. Johns, Newfoundland.

100 GOLDEN HOURS AT SEA: An elaborate travelogue between New York and New Orleans, with plenty of pictures. Write: Southern Pacific Steamship Lines, 165 Broadway, New York City.

INDEPENDENT TRAVEL AROUND THE WORLD: Port to port information for the traveler who likes to find his own way. The service is via Cunard and NYK lines.

For a copy write: Cunard Line, 25 Broadway, New York City.

KEY TO INSCRIPTIONS ON VIRGINIA HIGHWAY HISTORICAL MARKERS: By keeping this book open as you drive through Virginia, and matching it with the numbers on the historical signs by the roadside, you can study Civil War History at first hand without even stopping. Write: State Commission on Conservation and Development, Richmond, Virginia.

HOLIDAYS: A 64-page booklet that tells all about the resort places in England, Wales, and Scotland. From Great Western Railway, 505 Fifth Avenue, New York City.

SWEDEN: This is in the nature of a periodical but it is full of information about steamship lines, railways, and motoring conditions. From: Swedish State Railways, 551 Fifth Avenue, New York City.

Thialion

is a dependable agent to prescribe in rheumatism, gouty conditions, biliousness, constipation and wherever there is evidence of acidemia or decreased alkalinity.

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Before the Operation and After

In preparation for the operation one table-spoonful of Agarol on retiring in place of the usual castor oil, will insure against gastric upset. Again, a few days later when the patient begins to take nourishment Agarol in half doses is the logical eliminant because it stimulates peristalsis gently without griping or pain.

AGAROL is the original mineral oil and agar-agar emulsion with phenolphthalein. It softens the intestinal contents and gently stimulates peristalsis.

Agarol is palatable without artificial flavoring and easy to take. The usual dose in chronic constipation is a table-spoonful, reduced as improvement takes place.

A supply gladly sent for trial.

AGAROL for Constipation

WILLIAM R. WARNER & CO., Inc. 113 West 18th St., New York City

Doctor:-

Suppose, instead of a patient consulting you for Cystitis, it was your bladder that irritated, pained and made you expel just a few drops of lacerating, burning urine. Wouldn't you be grateful if you knew of—

CYSTITABS (effervescent)



They will relieve in just a few minutes because the formula is so logical—Hydrangea, Uva Ursi, Tritein, Atropine and Buchu Compound

WALKER, CORP & CO., Inc.
Drawer 1320, Dept. F, Syracuse, N. Y.

You may send CYSTITAB literature and samples to:

M.D.

That Grass May be Saw-dust!

[FROM PAGE 25] could take air from above the engine; if he had only extended it upward he would have had a submarine!

Driving those roads in the rains was a feat of navigation. One held to a straight course between the fences by keeping known landmarks in line; he recognized his corner by other landmarks, turned a right angle, and followed the other road by taking sights. If he diverged by ten feet from the straight and narrow course (not path) he dived into the ditch and abandoned his car.

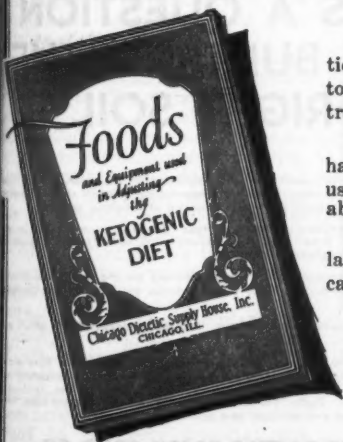
But it quickly became evident that we were not the only ones who welcomed the new road. Every one enjoyed the novelty of driving on concrete. People

rode fourteen miles to the county seat to buy a dish of ice cream, making that an excuse for the enjoyable trip on the pavement. Every line of business suffered, and practice fell off to nothing. The other doctor and I both left about the same time, and for many years the people were unable to secure another resident physician.

My next location was in one of the larger cities of the state, and it was here that a study of conditions became interesting. War times, and the flu epidemic which followed a little later, were unexpected aids in becoming established. I practiced there twelve years, with at least average success. But conditions continually became more severe, and should be considered by any one who is seeking that sort of a location.

First came the Compensation Act, to take care of injured employees; a worthy object. After much juggling between the medi-

Send for This Catalog



Contains a complete description of Special Foods adaptable to the high fat diet used in the treatment of epilepsy.

Many hospitals and clinicians have found these foods most useful in computing a comfortable diet for their patients.

Contains many special calculated recipes for use in low carbohydrate, high fat diets.

Pin to your letter head and mail.

Send me.....copies of this catalogue of suggestive Foods for the Ketogenic Diet. Med.Ec. 2-31

CHICAGO DIETETIC SUPPLY HOUSE
1750 W. Van Buren Street, Chicago, Illinois



IT'S A QUESTION OF BUILDING THE RIGHT SOIL

Nature, with her usual foresight, implanted in the colon friendly protective germs to safeguard us from harmful putrefaction of bowel waste and subsequent absorption into the system of intestinal poisons.

If we can promote the growth of these "friendly" germs—the *B. acidophilus* and *B. bifidus*—we automatically work with Nature to suppress putrefaction by changing the flora.

Rather than employ doubtful drugs, why not try the food Lacto-Dextrin (lactose 73%—dextrin 25%) which provides the ideal soil for changing the flora.

Patients like to take Lacto-Dextrin. It makes a pleasant drink which any one can enjoy.

Intestinal difficulties which make it desirable to change the flora are very often accompanied by sluggish bowels—sometimes constipation in chronic form—that a bowel stimulant, like Psylla—*Psyllium Seed*—is a wonderful aid. Psylla, The Battle Creek Psyllium, is selected seed, thoroughly cleaned and sterilized as a protection to the user.

THE BATTLE CREEK FOOD CO.

Dept. ME-2-31, Battle Creek, Michigan

We will gladly send trial packages of Lacto-Dextrin and Psylla with fuller information on how to prescribe them. Write your address on margin.

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al profession and the insurance companies, it evolved that certain doctors might have this work, and the others might not. The fact that the state stepped in as the largest insurance carrier made no difference. The state issued licenses to practice, but only a few holders of certificates were allowed to do the work which the state thus controlled.

To cite an example: A painter injured his ankle. After one or two visits, the boss of his gang happened to be present and informed me that the case would have to go to Dr. ——. There was nothing to do about it. It was not the employer, nor any official who spoke; merely the draw-boss of his gang. But what can the medical profession do when organized labor speaks?

The railroads had previously had physicians to take care of their employees. Traction lines, telephone, gas and electric corporations followed suit. The police and fire departments had their special physicians. Hotels, and finally many of the stores did the same; they sent their employees to a doctor who was designated regardless of the wishes of the workers.

A large manufacturing establishment was induced to locate close to the city, receiving a substantial bonus to which we all subscribed. As soon as they were in a position to begin operations, they appointed one doctor to look after the injuries, and another for the medical care of employees—and their families. They placed numbers of obstacles in the way of any other physician collecting a bill.

The city then established a municipal hospital to take care of all injured persons who did not come under the above classifications. The man who at one time held a mortgage on my home, went to the city hospital for free treatment. He gave as his reason that he was paying for it in taxes and might as well

have something in return for his money.

By the time all these lines of business had been organized for medical care of employees, it became apparent that almost every one who was working at a steady job for either wages or salary, was provided with free medical attention. It was at this point that the county stepped in to arrange for any who did not fall into the above class. A man was secured at a handsome salary to organize the county hospital. He did so, to the tune of a good many dollars of tax-payer's money, of which the physicians contributed their share. Additional buildings were erected and equipped.

A staff was organized, of which I became a member. For years I labored in clinics and wards, helping to care for the stream of applicants who sought free treatment. There I encountered many patients who formerly had

REVELATION TOOTH POWDER



THE PRIMARY CAUSE of receding, bleeding and sensitive gums is GLYCERINE, and for that reason alone Revelation is never in paste form.

*Revelation
Corrects These
Ailments*

*Send your card for full size can of
Revelation and literature without
charge.*

August E. Drucker Co.
2226 BUSH STREET, SAN FRANCISCO

TO TURN THE TIDE

PARTICULARLY DURING THE WINTER MONTHS
WITH THEIR RESPIRATORY TROUBLES

Gray's Glycerine Tonic Comp.

(Formula Dr. John P. Gray)

OFTEN SUPPLIES THE RESERVE REQUIRED

Against a Breakdown, or

To Hasten Convalescence and Recovery,

without sequelae due to lowered vitality.

THE PURDUE FREDERICK CO., 135 Christopher St., New York, N. Y.

PLEASANT TO TAKE... EFFECTIVE IN ANEMIA

HEMO-GLYCOGEN is a preparation of the active principles of liver combined with defibrinated fresh horse blood.

The liver extract of HEMO-GLYCOGEN stimulates the formation of red blood corpuscles and the hemoglobin furnishes the organic iron which is the most essential element of the corpuscles. The combination makes HEMO-GLYCOGEN of value in the treatment of secondary anemia, tuberculosis, chronic infection, prolonged illness, and as a general tonic.

HEMO-GLYCOGEN

Compounded at Laboratories of Chappel Bros., Inc.

It is known that to eat liver daily over a long period is nauseating, but HEMO-GLYCOGEN is so pleasant to take that the patient will not tire of it.

We want physicians to become acquainted with HEMO-GLYCOGEN, and will send complete literature upon receipt of the coupon.

LABORATORIES CHAPPEL BROS., Inc., Rockford, Ill.

Please send descriptive literature about HEMO-GLYCOGEN.

Dr.

Address.

paid—or might have paid—the bills I sent them; many more who should have been paying some doctor for what they received.

A few physicians were eminently successful. They were boosters for the existing order, and had a select clientele to whom the amount of their bill was a detail of no importance. Many more, I think, were in the position in which I now found myself; obliged to keep up appearances while watching income dwindle, as the days were largely devoted to charity work in hospital and private office.

A later suggestion comes from a man who is receiving a very satisfactory salary from the city for his medical work. He urges that the members of the staff of this hospital be required to make free calls anywhere that their services are demanded. This suggestion has not yet been put into effect, but it is reasonable to suppose that it is possible. To date, no one has suggested that the members of the staff should be paid for their work.

It may be that conditions in the East are much the same. But, like the author of the article mentioned, I have sometimes turned my thoughts longingly to the country east of the Rockies, where I grew up. But there is this difference. In my case the separation has been too long for me to feel any of the pangs of homesickness shown in the statement in that article: "I would be tickled to death to be able to...regale myself with a whiff of good homely manure."

Some how I do not feel that way. Even in fair California, one who knows where to look can find odors with more of a kick than that.

No; it would not be memories of "the faint aroma of the barnyard" that would induce me to return to the East. It would be something more economically urgent: the desire to collect enough money to meet current expenses.

Anticipation Not Procrastination

Acute attack by infectious disease, development of inflammation or sepsis, handicaps or prevents effective defensive action of the blood and body cells and results often in the development of "malignant" or "typhoid" states, the so called blood dyscrasia. Anticipate this by prescribing such agents as echifolia, iris and viola, as supplied in

ECHITONE

a carefully prepared combination of these natural remedies, which can be given in full doses and pushed to definite therapeutic effect.

Genito—Urinary irritation or inflammation, demands Thuja, Pichi, Triticum Repens, Saw Palmetto and Hyoscyamus, as supplied in

CYSTO- SEDATIVE

Cystitis, Prostatitis, Urethretin (acute or chronic) Enlarged Prostate, Stranguary, Incontinence.

*Samples and literature
on request.*

Strong, Cobb and Co., Inc.
Cleveland, Ohio

—"decidedly more palatable than the ordinary Carlsbad powder"—says the

BRITISH MEDICAL
JOURNAL
of
KUTNOW'S
Effervescent
POWDER



CONTAINS NO SUGAR

A mild laxative which aids in removing waste material from the intestines. For temporary constipation, headache, biliousness and flatulence due to this condition.

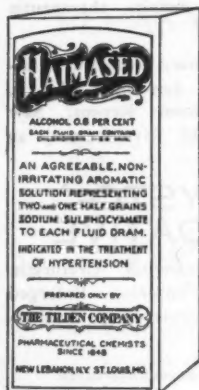
KUTNOW'S POWDER, although pleasant to the taste and delightfully refreshing, CONTAINS NO SUGAR. If an acid flavor is preferred, it can be obtained by the addition of a few drops of lemon. This will in no wise alter the beneficial effects of the powder.

We will gladly send you a physicians trial bottle gratis!

S. KUTNOW & CO., LTD.,

121 Varick St., New York, N. Y.

Also makers of Kutnow's Anti-Asthmatic Powder and Anti-Asthmatic Cigarettes.



HYPERTENSION

Successfully relieved with

HAIMASED

(TILDEN'S)

An agreeable, non-irritating, aromatic solution representing 2½ grains Sodium Sulphocyanate to each fluid dram.

*(Sample and Literature to
Physicians on Request)*

Prepared only by

THE TILDEN COMPANY

Pharmaceutical Chemists since 1848

New Lebanon, N. Y.

St. Louis, Mo.

Medicine and Dentistry

[FROM PAGE 13] of ever widening, ever extending concentric circles, going who knows where?

An earnest student of any problem asks to where all this leads: and that is where the trouble starts, for his enquiring mind demands that he make a supreme effort to ascertain where it leads, and what it is all about. One basic fact he learns very early in this pilgrimage: it is, that any pathological process does not operate under one law in the oral cavity and under another law elsewhere in the human body.

A metastatic process is a good example. It may start anywhere from a known cause, or be of unknown origin. It may travel everywhere, and oft-times does.

Unfortunately this pertinent vital fact is too often disregarded by both the professions and the public in general.

Another fact must be driven home. It is that an unclean, uncared for, neglected mouth is a colossal menace to good health; for a neglected inflammatory process invading the soft overlying tissues extends and involves the bony supporting structures, and soon becomes circulatory and invades the general system.

This is where this disciple, this laborer in no-man's-land in this middle ground between Dentistry and Medicine comes into the picture. He is erroneously styled a minor Oral Surgeon. Heaven alone knows what is minor about his effort, his field or his accomplishments! Possibly it may be because he has to dig for everything he gets, digs into trouble in the filthiest cavity in the human body, and then has to dig his way out.

A physician or surgeon may lose a critical case, although everything humanly possible has

been done, but to the individual working in this no-man's-land, if a serious infection terminates fatally, even though it existed in all its virulency long before he came into the case, woe be unto him! No matter how competent he may be, his professional reputation is gone. His responsibilities are major, even though his name be minor. His protection is the minor quantity, for one hears on every hand: "Surely his instruments must have been dirty, and he infected the patient." So self-preservation demands that he be well prepared.

The fact is that this disciple, this laborer in no-man's-land, this neglected middle ground, traveling under the pseudonym of "minor oral surgeon," is in truth a Stomatologist, a Physician and Surgeon of the mouth. His effort is directed toward the maintenance of health, through prevention and elimination of oral infections. [TURN THE PAGE]

DR. JAILLET'S PEPTO-FER

Assimilable Iron

Prepared with chloropeptonate of iron by Darrasse, Chemist, according to the original formula of Dr. Jaillet. Highly endorsed by prominent French Physicians. Gives good results in anemia, convalescence, debility.

1 tablespoonful immediately after each meal.

To avoid imitations, physicians are earnestly requested to insist upon original bottles being supplied with the names:

J. JAILLET M. SCHAFFNER
and the address:
DARRASSE 13 Rue Pavée
PARIS 4°

IN HEMORRHOIDS

★ ★ ★ ★

*Congestion
Causes
Pain*

★ ★ **C**ongestion causes pressure and pressure causes pain. That is what brings the patient to the doctor.

★ ★ Anusol Hemorrhoidal Suppositories relieve the congestion and thereby relieve pain. No opiate or local anesthetic to dull the pain perception and obscure the symptoms. Rational, safe, convenient.

★ ★ The treatment of hemorrhoids should begin in the doctor's office. Let us send you a trial supply for use immediately after examination in your office.

ANUSOL HEMORRHOIDAL SUPPOSITORIES

RELIEVE PAIN REDUCE CONGESTION CONTROL HEMORRHAGE

Schering & Glatz, Inc., 113 West 18th St., New York City

PRUNOIDS

A lack of secretion in the intestines is one of the principal causes of chronic constipation. Prunoids given at night over a period of one week will increase glandular activity without exciting pronounced peristalsis and will gradually overcome this form of constipation.

Prunoids are made of Phenolphthalein (one and one-half grains in each), Cascara Sagrada, DeEmetinized Ipecac and Prunes.

**Sultan
Drug Co.**

*Saint Louis,
Missouri*

Gentlemen:

Please send me a professional sample of PRUNOIDS.

Dr. _____

Address _____

Samples to Physicians Only

In the accomplishment of this object he is worse than useless, unless he is conversant with the structural formation and the vital processes going on outside and inside his special field.

In order to attain any degree of proficiency in his work and bring about desired results, he must of necessity be a man of keen perception and observation, and a seeker for diversified knowledge. He must be able to differentiate between cause and effect in order not to mistake a symptom for a disease. Without definite knowledge of the rules governing the functions of organs and the behavior of the entire human machine as far as this is possible, also must he be familiar with the behavior and reactions of tissues when subjected to trauma or disease. If his opinions are given without the support of obtainable basic facts bearing on the specific case, they are of no helpful value, and his honest though misdirected effort many times does irreparable harm.

For, a diagnosis to be of any value to the one afflicted must of necessity carry with it: first, the recognition of cause; second, the suggestion of and the application to the disease or injury of a proper remedial agent to bring about its cure, or at least its alleviation where a cure is impossible. Results are what count today, and that is just what we in both professions are called upon to deliver. (NO FOOLIN!)

To cite a concrete example calling for general knowledge, and by the way one all too often overlooked: given an arthritic condition, which is by no means always due to focal infection, though may be (dependent on type). Often the antecedent factors are overlooked, the oral manifestations being symptoms of a circulatory disturbance in remote organs, or they may be mirroring the cachexia of a general breakdown. In these cases a favorable prognosis could not be sanely

A Cod Liver Oil Concentrate of the Whole Oil

MORRHUOL

(Chapoteaut)

prepared by the Chapoteaut Method presents in palatable capsule form—(really little pearls, easy to swallow).

A concentrate of all the therapeutic principles present in the oil as well as Vitamins A and D. Nothing removed but the fat.

Prescribe Morrhual at the rate of 3 capsules for each spoonful of Cod Liver oil, and watch the results!

Samples to test it, if you wish

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Control with Tolerance—

Two reasons for the unusual success
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Numotizine

Provides a safe antipyretic and analgesic—a valuable adjunct in the treatment of seasonal colds, rheumatism, respiratory affections, etc.

Numotizine is applied externally—does not upset the stomach—acts quickly—can be removed after producing desired results.

The formula shows why it is effective.

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Gualacol 2.6	Formalin 1.5
Cresosote 13.02	Quinine 1.5
Methyl Salicylate 2.6	
Glycerine and Aluminum Silicate,	
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Send for sample and literature

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"The saturated sulphur-bearing saline
laxative"

OcCy-Crystine

GOOD PATHOLOGY and

GOOD THERAPEUTICS

are intimately associated in the recognition of the predisposing influences of faulty BOWEL AND BLOOD STREAM ELIMINATION in ACUTE INFECTIOUS DISEASE. The speedy, effective, non-gripping action of OcCy-CRYSTINE has recommended it for this objective to physicians everywhere.

Liberal clinical trial supply, postage prepaid, on request

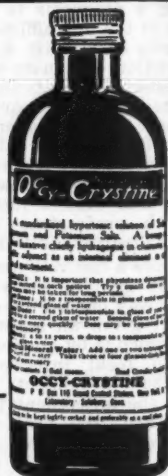
OcCy-CRYSTINE CORPORATION
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M. E.

Gentlemen:—Please send me postage prepaid a clinical trial supply of OcCy-CRYSTINE.

Name.....

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Laboratory
Salisbury, Conn.

looked for, much less brought about through tooth extraction, infection not being the causative factor.

Therefore he, who looks and hopes for the cure of all bodily ills through the ruthless unindicated extraction of innocent teeth, hoping by chance to make an empirical bulls-eye (having acted on a false conclusion from a diagnosis arrived at without mature thought having been given, based solely on his own opinions unsupported by pertinent obtainable facts), falls far short of realizing his desired goal. Because in this case the symptom was mistaken for the disease, he became a veritable butcher of humanity instead of a benefactor. Honest though he may have been and anxious to help his patient, still his false conclusion, based on a faulty premise and acted upon, has become a boomerang with failure instead of success as the result.

Reason, not logic, should always rule; for reason demands facts. And facts are a necessity for correct diagnosis.

In the past many men practicing general dentistry have felt that after cleaning, filling, extracting and replacing defective teeth their responsibility was at an end. I regret to say many physicians also have either ordered teeth extracted wholesale, or have ignored entirely patent existing pathological mouth lesions. They have treated this middle ground and its far reaching effects on general systemic conditions with silent contempt. When these types, from both professions, were in the majority it made this oral cavity and its adjacent structures a veritable no-man's-land. Both professions were side-stepping their responsibility, unmindful of its far reaching influences.

Time brings about some very desirable changes, and it is well for both professions and patients that there are but few of these types left. The day has passed

when the plug hat and swallow-tail coat can be substituted for brains. Such camouflages went out with the shot-gun prescription and the free painless (?) tooth yanker, with his brass band and wagon all lit up in the public square: oft-times both the tooth yanker and the wagon were well lit up! Fortunately we now have in their stead the earnest, educated, skillful men in both professions, who are in search of real knowledge and are out for facts. Such men have to be shown!

We of the dental profession need more professional contacts with scientific medical men, and they in turn with the educated dentist. I am happy to say we are both forming and broadening these helpful necessary contacts. As a result, a liberal education develops for both. We gain more consideration and respect for the other fellow's opinions, and are more fitted and willing to see the

FREE ^{BIG} 6-Quart Sample MU - COL

An Aseptic
Prophylactic
Anti-Catarrhal
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Wash that
Guarantees
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The effectiveness of Mu-col as an antiseptic wash is attested to by thousands of physicians who prescribe and use it for effectively cleansing the entire membranous area. Aids quick granulation. A saline-alkaline powder easily soluble in water. Superior for feminine hygiene. Indispensable in every physician's practice.

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 Send sample of Mu-col, enough
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 Address.....
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matters under consideration from his viewpoint. For each in his chosen field is in possession of special knowledge which, being applied, aids materially in the intelligent solution of our mutual problems.

So this pioneer, this stomatologist whose important field has been "no-man's-land," this professional man who is neither wholly a dentist, nor wholly a medical man, whose field is this middle ground between the two professions, does not desire to encroach where he does not belong, but rather seeks and asks to be advised and to advise in turn.

Truly, there is glory and grief enough for both in his chosen field. Therefore let each stay in his own back yard. Let dentists continue to be dentists, and physicians be physicians. Let the shoemaker stick to his last! But let us work together in closer harmony, respect and confidence for the ultimate good of all concerned, especially for the benefit of the patients entrusted to our mutual care. Let us meet on a common ground, fight for a common cause to the end that diagnoses may be more exact, and avoidable mistakes made: that the surgery of the mouth may be more skillfully, more thoroughly, more aseptically, more satisfactorily performed under mutual suggestion, supervision and scrutiny.

Follow up your dental cases. See to it personally that dangerous oral foci, including residual areas, have been completely and skillfully eradicated, that pyorrhea and Vincent's infection are not present, and through this co-operation avoid for your patients many untoward reactions. See to it that the dentist's "clean bill of oral health" means just that, and that your patient has not been left with a septic mouth, still harboring dangerous foci of infection. Don't be content to allow a granuloma to remain (in situ) after a tooth has been ex-

tracted: insist on sane, delicate but complete curettage, sane surgical treatment consistent with the rules governing bone and neoplastic surgery elsewhere in the body, always remembering that the same laws prevail.

A cyst is a cyst; sane surgery demands complete removal of the parent soil. So why quibble?

See to it also that the patient's mouth has not been left, as it too often is following multiple extractions where proper surgery has not been performed, looking like a plowed field, or perchance as though dynamite or T. N. T. had been selected as the instrument of choice.

Give this professional brother who occupies the middle ground—this special field between the two professions—the right hand of fellowship. Accord him your recognition and full support. He, like yourself, has evolved through his attainments, abilities and accomplishment of worth-while results in his field, and should command your admiration and respect.

He knows that he has much to learn, but he has also much of value to contribute to the attainment of the common goal, good health.

He asks your confidence, your cooperation, your advice and your support: in return he respectfully tenders his. For this middle ground (as I have presumed to call it) is a field in which we and the public at large are all most vitally interested. It is an important one in our mutual fight against disease. It is a field to which time will bring a greater and greater importance.

So may we work together hand in hand, in mutual confidence and esteem, and thereby more nearly and more quickly approach the realization of our aims and desires—the attainment for ourselves and our patients of that long sought, highly prized, much desired but seldom realized goal, "Good Health."



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(HUXLEY'S EXTERNAL ANODYNE)

**FOR THE
QUICK RELIEF
OF PAIN
AND
CONGESTION**

When immediate alleviation of pain is called for Bet-U-Lol may be advantageously used while the underlying pathological condition is being treated.

Bet-U-Lol contains Menthol, Methyl Salicylate, and Chloral Hydrate.

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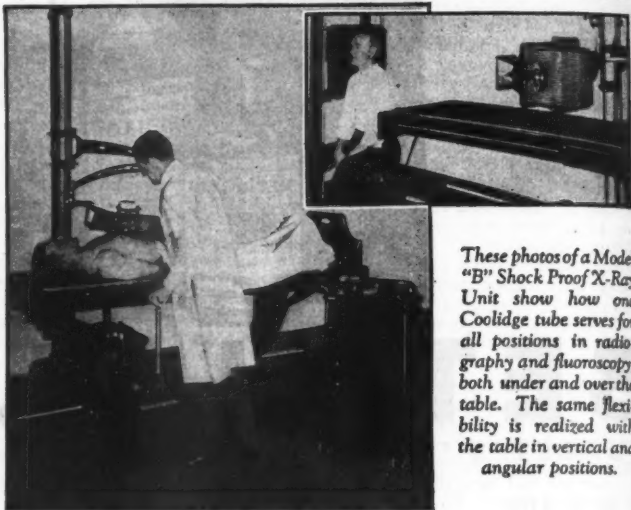
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These photos of a Model "B" Shock Proof X-Ray Unit show how one Coolidge tube serves for all positions in radiography and fluoroscopy, both under and over the table. The same flexibility is realized with the table in vertical and angular positions.

"I Cannot Praise The Victor Shock Proof Enough"

"THIRTY-THREE years ago I installed an x-ray machine, then largely out of curiosity," writes a Minneapolis physician. "The Victor Shock Proof is my sixth installation and I would not change it for any other x-ray machine of the present time . . .

"I cannot praise the Victor Shock Proof enough. As a piece of mechanical construction it is a delight. Quick and responsive to every change in position, anyone can operate it . . . to one situated as I am this outfit is well-nigh perfect. Uniformity in

radiographic results is certain, together with remarkable clarity and beautiful contrast. One can undertake, with assurance, lateral spine and all abdominal work; and can do fine chest work with flash exposure. The unit is shock proof and with reasonable care should last a lifetime."

A full appreciation of the Victor Shock Proof and its significance may be gained through reading an illustrated brochure we have prepared. Won't you write for a copy today? It will be mailed free.

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FORMERLY VICTOR X-RAY CORPORATION

Join us in the General Electric program broadcast every Saturday evening over a nationwide N. B. C. network.

February, 1931

111

Medical Talkies

[FROM PAGE 32] and makes such sound films available to the thousands of doctors who own amateur equipment.

A clinical lecture or demonstration with charts, models or apparatus can easily be filmed with the voice and also some operations that do not require the intense application of all the faculties of the surgeon, in Dr. De Lee's opinion. "But I know," he says, "that it would be impossible for many operators to do their work under the camera in the glare of light and heat, amidst the possibilities of errors by their assistants and nurses (and their own) and at the same time keep up a consecutive running discourse into a microphone.

"I feel sure it would not sound right to them as they coldly watched and heard it on the screen. Further, the patient has to be protected. The cameraman and sound engineer must have time. It is much easier and more satisfactory to take the picture in the usual way (leaving room at the left side of the film for the future sound track) and then later on sit down calmly before the 'mike' and, as the operation unfolds itself, talk about the various steps or even read from a previously prepared script. In

my film I did both and the operation was partly done while I listened to a script which was carefully worded in advance. The operation fitted the script and later the same script was read and recorded as the operation appeared on the screen."

The talking motion pictures on the official program of the recent American College of Surgeons Clinic were as follows: *The Thyroid Gland* by George W. Crile, M. D., Cleveland; *Prolapse of the Uterus and Posture in Surgery* by Philemon E. Truesdale, M. D., Fall River, Massachusetts; *Laparotrachelotomy* by J. B. De Lee, M. D., Chicago; *Spinal Anaesthesia* by Richard B. Stoud, M. D., Madison, Wisconsin; *Pott's Fracture* by Clay Ray Murray, M. D., New York City.

In covering the story of the convention for the *Philadelphia Inquirer* of October fifteenth, John M. McCullough reported, "Dr. Philemon E. Truesdale of Fall River, Massachusetts, delivered a radio address in which he spoke most enthusiastically of the part which talking motion pictures are playing and will play in the education of medical students in presenting the need of and manner of securing sanitation and in various other matters relating to public health."

Further, Dr. Truesdale in a recent letter to the author stated, in regard to his utilization of the talking motion picture in medical work, "Thus far I have produced four talking motion pic-

Gripeless EVAC-U-GEN

has become the first thought in CONSTIPATION. Non-depressing, non habit forming, safe for pregnant cases and nursing mothers, pleasant for children.

Formula:—Sodium Salicylate, Cascara, Phenolphthalein and Evacugen Comp.

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WHAT ABOUT THIS MENTHOL BUSINESS?

We have no scientific proof that smoking menthol-cooled tobacco is a cure for colds, throat or nose ailments. As cigarette manufacturers we have no right to prescribe as physicians. But we conscientiously believe that Spuds are less harmful than any other cigarette on the market. Have you any opinion?

SPUD

MENTHOL-COOLED CIGARETTES

20 FOR 20¢ (U. S.) . . . 20 FOR 30¢ (CAN.)

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(Free Spud pack gladly sent to any physician upon request)

tures. They have been shown at scientific exhibits and before many medical societies. At the recent meeting of the American College of Surgeons at Philadelphia the last two of my films were shown to large audiences, members of which appeared to be very enthusiastic over this form of medical lecture."

Dr. Truesdale further declared, in regard to the distribution of personal medical films, that this matter is being temporarily held in abeyance by the leading medical societies of the country but that as soon as a general policy is defined the production of such medical films will very probably take place on a larger scale.

Discussing the advantages of the talking motion picture as a means of presenting medical data, Dr. Truesdale recently said in an address before the Society of Motion Picture Engineers, "A much desired effect of the talking motion picture in presenting a medical subject will be the eco-

nomy of words. Since every syllable represents a monetary tax on the speaker, for the first time in history, there will be this very tangible controlling factor in favor of brevity, without loss of substance. With every unnecessary word deleted from the text, the recital of the teacher, by phonetic and artistic description, converges upon the point at issue in such a manner as to engrave a lasting impression upon the memory of the student.

"Furthermore, the general practitioner, in his struggle to keep informed upon recent advances in medical knowledge and their practical application, finds a problem difficult to solve. By the monetary cost of travel in pursuit of post-graduate study and that intangible but, nevertheless, very appreciable loss in clientele entailed by absence from his community, the doctor's continuation schooling is reduced to medical books and journals. In

Here is a Calcium- immediately assimilable, administered orally—and that actually tastes like Chocolate Peppermint

Olajen

TRADE MARK REGISTERED

COLLOIDAL

Not an ordinary calcium with a would-be chocolate disguise, but a sound and ethical preparation utilizing a vehicle of novel form to combine calcium and other physiologic salts with lecithin in a colloidal base. Extensive clinical experience backed by laboratory tests shows that Olajen is a serviceable agent in conditions of calcium deficiency.

When the normal calcium is low,
When the patient is undernourished,
When bodily resistance must be raised,
When bronchial affections "hang on" and sap vitality—prescribe Olajen. One teaspoonful to be eaten after meals and at bedtime. Clinical results will demonstrate to you, often more rapidly than expected, that there is a definite therapeutic reason for offering Olajen in its colloidal chocolate vehicle.

Olajen contains per 8 oz.:	
Calcium lactate	12 gr.
Iron phosphate	12 gr.
Sodium phosphate	12 gr.
Potassium bi-tartrate	12 gr.
Lecithin	4½ gr.
in a colloidal, nutritive base.	



OLAJEN, Inc.
451 West 30th Street
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The Medical Profession IS interested in "Lotio Sambuci"

In the 18 years that EVANS' Elder Flower Eye Lotion (Lotio Sambuci) has been on the market, there has never been a more convincing demonstration of its strong appeal to the medical profession than that provided by the nation-wide response to our October and November advertisements in this publication. We greatly appreciate this response and hope that more of the physicians who received samples of Elder Flower will let us have their opinions regarding its efficacy.

"Lotio Sambuci" was first prescribed by an internationally known oculist and really owes its present reputation to the medical profession. However, we realize that you as a physician must reach your own conclusions regarding the professional value of any medication you prescribe. And to help you to do so in this case, we are providing the coupon below.

GEORGE B. EVANS LABORATORIES, INC.
214 S. 12th Street Philadelphia, Pa.

Evans'
Elder Flower Eye Lotion

GEORGE B. EVANS LABORATORIES
214 S. 12th Street, Phila., Pa.

Kindly send me a sample bottle of EVANS' Elder Flower Eye Lotion, together with the EVANS Eye Cup.



NAME (Please Print).....M. D.

ADDRESS.....

DRUGGIST'S NAME.....

ADDRESS.....

(Samples to Physicians Only)

the light of such developments of modern science, it is likely that certain relationships between teacher and students of medicine will be notified. Lectures and demonstrations recorded on films will be made available to doctors wherever located, in city, town, or backwoods. Instead of the student appearing before the teacher in the amphitheater or the laboratory, the teacher, in his amphitheater or in his laboratory, appears on the film before the doctor at a society meeting, a hospital staff conference or, it may be, in the doctor's library."

Thus, in view of the manifold advantages offered by the talking motion pictures and the ra-

pidity with which the medical profession, always alert to new and improved methods, is embracing its adoption, it may be seen that this method of exchanging ideas of operating technique, of presenting data to students and the practicing physician and of educating the public along health lines is becoming increasingly popular. With the rapid strides being made in the perfection of amateur filming equipment, it may be safely prophesied that an even greater number of physicians will "talk their own" than the thousands now engaged in the production of silent medical motion picture records.

Credit Wheels

[FROM PAGE 19] more, and still an abysmal silence from Mr. Doe. Promptly the collector covering the district where John Doe lives, removes his collector's card from the drawer where it has been waiting since the day the account was received and goes out with diplomacy on his tongue, but firmness in his eye.

The results of that visit to the debtor are reported on his card; if he does not succeed in seeing John Doe, or if John Doe promi-

ses that he will pay five dollars on account if visited, say, a week from Thursday, the collector attaches a colored signal to the card which reminds him to visit John Doe a week from Thursday.

If, on the other hand, John Doe disputes the account, the collector reports that fact, and Dr. Jones is informed accordingly. Upon his advice that the account is accurate, the collector makes another attempt at settlement.

If he fails, John Doe promptly receives a "Notice of Intention to Commence Action," a formidable looking document full of legal terminology, well calculated to impress its recipient. At the bottom of the document, in bold type, the debtor is given a last chance to settle the account, by being told:

ANGIER'S EMULSION

is a most desirable remedy to prescribe for

HEAVY COLDS—GRIPPE—BRONCHITIS

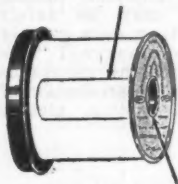
Angier's is not a depressant but is naturally soothing. It loosens the secretions, promotes expectoration, relieves congestion and eases respiration. Stasis, constipation and resulting toxemia are controlled by means of the emulsified oil in the Emulsion.

Trial bottle free to physicians

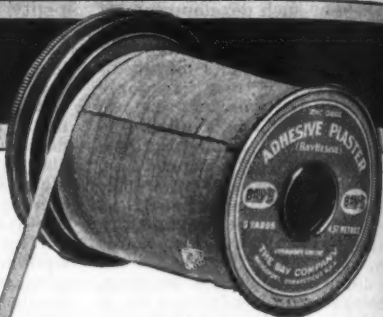
ANGIER CHEMICAL COMPANY,

Boston 24, Mass.

Hollow tube upon which adhesive is wound, and which revolves around core.



Metal core permanently attached to cover of container.



BAYHESIVE in Eighth and Quarter Inch Strips

BAYHESIVE, the superior zinc oxide adhesive plaster, is now obtainable in eighth and quarter inch strips in the new Bay reel container which unrolls like a reel and is dustproof. These convenient narrow strips, adaptable to so many uses, have become popular over night.

Because it attains maximum tenacity at body temperature—because it sticks and sticks and sticks, BAYHESIVE has won professional respect wherever used.

The coupon will bring you a physician's complete sample package of Bay's Surgical Dressings.

SURGICAL

BAY'S

DRESSINGS

THE BAY COMPANY
BRIDGEPORT, CONNECTICUT

The BAY COMPANY, Bridgeport, Conn.

Gentlemen:—Kindly send free physician's complete sample package of Bay's Surgical Dressings.

Doctor

Street and No. City State

Dealer's Name

M.E.

"The time to settle a debt is before it gets into court. After judgment is rendered, ALL DEFENSES ARE BARRED, and the earnings of the debtor are subject to garnishment and any property belonging to him, not exempt by law, may be levied upon and sold, AND THE COSTS INCREASE ALL THE TIME."

The Bureau reports that in its experience it has found this legal-appearing document to be the most effective single measure in producing action from a patient who has hitherto shown no effort to settle the account. It is, of course, withheld until all the other, more tactful means, have been exhausted.

At the same time that the above takes place, Dr. Jones is mailed this letter, from the Bureau's attorney:

"This is to advise that we are going to turn the above account over to our deputy sheriff for suit. This step is being taken after we have exhausted all amicable measures. Please DO NOT ACCEPT any settlement on this account without first communicating with this office.

"If this action does not meet with your entire approval advise us AT ONCE. This step advances the commission rate to 25%.

Yours very truly,

Physicians' Business Bureau, Inc.

"IMPORTANT—Report all payments made to you—PROMPTLY."

I must emphasize at this point what must be obvious—namely, that the Bureau uses stern measures not from choice, but when the necessity is developed by the case presented. When a patient is conscientiously making an effort to reduce the account, the

Bureau is quick to extend its sympathetic cooperation — and quite naturally, if the patient is unable to pay the account because of poverty, the Bureau is just as quick to report that fact to the physician, and arrange for the discharge of the debt.

But let us assume in the case of John Doe that the Bureau is dealing with a typical example of the hard-boiled, anti-social and defiant debtor, and that it becomes necessary to follow up the Intention to Commence Legal Action by bringing suit.

A summons is served, and simultaneously still another letter sent to Dr. Jones, which reads:

"Our deputy sheriff has this date served a summons on the above party, and set the case for trial in Esq. J. H. Klink's Court, 114 Adams Avenue, at the time and date above shown.

"Should the debtor appear to defend the suit your office will be advised. If he does not, judgment will be rendered by default and garnishment against his employer, or an attachment, will be in order.

"It is imperative that you do not accept any settlement or payment on this account WITHOUT FIRST COMMUNICATING WITH THIS BUREAU, as court costs amounting to \$2.75 have already accrued."

The case is presented in court, judgment secured, and garnishment or attachment executed. These are steps in which credit bureau technique disappears, and the work of an attorney begins, and it is therefore not necessary to describe the forms which make up this part of the collection apparatus. [TURN THE PAGE]

"Secure results by most convenient means"

MICAJAH'S MEDICATED WAFERS

astringent, decongestive, tissue-toning, soothing. *Leucorrhoea, Hypersecretion, Relaxation, Ulceration, Erosion, Endocervicitis.*

More convenient to use than the fountain syringe. More effective in action than vaginal douche.

Endorsed by many years of professional use.

Samples and literature on request.

Micajah & Co., 194 Conewango Ave., Warren, Penna.

Also MICAJAH'S SUPPOSITORIES

Reliable, Inexpensive INFRA-RED HEATER

For Only
\$6.50



Sunbeam

POWERFUL,
INTENSE RAYS

This guaranteed Sunbeam Infra-Red heater relieves pain and inflammation. It delivers penetrating infra-red rays that create cutaneous and superficial hyperemia, draw the blood from the deeper tissues, relax muscular spasms, increase circulation.

This powerful heater is fully as effective as those which sell for many times its price. It is backed by forty-one years of high quality manufacture, and the reliable Sunbeam guarantee. Sturdy, well built, effective. Weight only $3\frac{1}{2}$ lbs. Attractive and convenient to handle. Catalog No. D7. \$6.50.

HEALTH-BUILDING ULTRA-VIOLET RAYS.



The particular kind of ultra violet rays you want can be produced with the Sunbeam Ultra-violite by merely changing the carbons. Effective ultra-violet rays to suit any individual condition!

No other ultra-violet lamp has been produced that is so practical, so efficient, so effective. This Sunbeam Ultra-Violite carbon arc lamp does not deteriorate. It remains uniform.

Write us for complete information on our line of health lamps. We manufacture three high grade carbons for use in the Ultra-Violite: Sunshine, Health Tan, and Prescription. (The latter sold only to physicians).

Model WS-1 illustrated. Complete with goggles, carbons, etc., only \$37.50. Floor model \$45.00.

Sunbeam

ULTRA-VIOLITE
CERTIFIED

Made and Guaranteed by

CHICAGO FLEXIBLE SHAFT COMPANY

5690 Roosevelt Road, Chicago, U. S. A.

41 Years Making Quality Products

Here we stop for a moment, and, tracing back, assume that John Doe is what the Bureau terms a "foreign account," meaning that he lives at a point too distant to be reached by one of the Bureau's collectors. That being the case, instead of a visit from the collector, following Letter Two, John Doe receives:

"Several urgent letters have been sent you in regard to the above account, but without results.

"We must have a settlement of this matter and if amicable means fail of adjustment **WE WILL BRING SUIT.** In the event you have made satisfactory arrangements since first hearing from us, it is imperative that you advise us immediately.

"Trusting that you will not force us to use legal measures to affect an adjustment on this account by your continued indifference, we are—"

The process from there on is the same with the exception that an attorney in the patient's city of residence assumes charge of the suit instead of the Bureau's own attorney.

I have purposely gone into considerable detail in giving this ex-

planation of the Bureau's system, for the reason that medical groups who may anticipate forming a similar bureau, would find an explanation without details practically useless. I have tried to avoid over-confusion, by taking up one point at a time; if you have followed this far, you will probably also want to read the following sub-details which fill in the few necessary gaps left in the previous chain of explanation.

Before a physician is accepted for membership in the Physicians' Business Bureau, Inc., he must be a member of the local medical or dental society, and he must sign an agreement which is too long to be reproduced here (I believe a copy can be obtained by writing the Bureau) but which provides, in brief, for a commission of 15% on all accounts within the city, with a minimum of \$2.00, and for claims collected by suit in Memphis a commission of 25%. Mr. E. P. McCallum, manager-attorney of the Bureau, is responsible for the statement that

Prescription Ware requires extra hard glass

In order to maintain the hard lustre and extreme clarity of Owens-Illinois prescription ware, temperatures as high as 2720 degrees Fahrenheit must be used in the melting and refining process. This costs us more but pays in the end on account of the vastly superior product obtained. Owens-Illinois Glass Company, Toledo, Ohio.



OWENS-ILLINOIS

PREScription WARE

IN PNEUMONIA

Support the heart with

During the crisis, life depends on how ably the heart can bear up under the increased burdens placed upon it. All clinicians agree that, when cardiac failure impends, supportive measures are urgently indicated.

In this emergency and especially in its prevention, rapid benefit follows administration of a combination of epinephrin and hypophysis cerebri—*Pit-Ren*. Cardiac distress is relieved, the blood pressure elevated, and the force of the heart sounds materially increased. At the same time, dyspnea is mitigated and diaphoresis promoted.

Used early in pneumonia, *Pit-Ren* may effectively prevent cardiac embarrassment during the crisis.

Literature free upon request

The dose is 1 cc. administered subcutaneously or intramuscularly, never intravenously. At the crisis, this dose may be repeated twice at intervals of twenty minutes.

Pit-Ren is supplied in 1 cc. Hyposols (ampuls) in sterile normal saline solution with chlorbutanol as a local anesthetic; also, capsules for oral medication.

PIT-REN

(Reg. U. S. Pat. Off.)

THE DRUG PRODUCTS CO., INC.

Pharmaceutical Manufacturers

26-33 Skillman Ave.,

Long Island City, New York

Manufacturers of Pulvoids Natrico for High Blood Pressure

the average rate of commissions is between 20% and 22%.

Collecting is not the only service rendered by the Bureau. One of the staff, a young lady, spends her entire time visiting the doctor-members, tactfully offering her assistance in straightening out bookkeeping problems, or in checking over the books to find accounts to be sent through to the Bureau. This is more than a service to members; it helps to keep them sold on the advantages offered by the Bureau, and is a reminder to members who would otherwise neglect, from sheer inertia, to send in their overdue accounts.

In the earlier days, an attempt was made to publish a credit rating book, a project which proved impractical, first, because of the cost, and second, because of the numerous revisions and additions in credit information constantly being received by the Bureau. It was finally found practical to centralize this information in the Bureau's office, where it was always accessible by telephone during business hours, and where it could be kept up to the minute. Nevertheless, occasional lists of chronic deadbeats are compiled, even now, multigraphed and mailed to members.

Another distinctive service is the Bureau's aim at all times to preserve the friendly relationship between the physician or dentist and his patient; persuasive, tactful methods are used until hope in them is exhausted.

Emphasis is placed upon the advantage of obtaining a note, or series of notes, from the patient; the collectors try whenever payment in full cannot be made, to secure such an agreement to pay in installments, and they succeed in a surprisingly large number of cases.

Generally speaking, law suits are discouraged; less than 10% of the accounts received during the Bureau's nine years of operation have proceeded to suit.

Still another unusual service

rendered doctor-members is the provision for placing the notation "Personal Account" on all the cards relating to a particular case, which designates that case for a special type of handling. "Personal Account" means that even greater precaution against offending the patient are to be taken, that no letters are written by the Bureau, and that the collector calls as a personal representative of the physician. No reference whatsoever to the Bureau is made.

I find that I must pause at this point in my article to say that the considerable amount of material as yet untouched upon obliges me to make it a "continued in the next."

There are numerous points that remain to be explained, points of practical value to medical groups anticipating the formation of their own bureau, and I am reluctant to omit a single one of these highly useful details. [CONTINUED IN MARCH MEDICAL ECONOMICS]

EFEDRON

(Hart Nasal Jelly)

for COLDS

Exhibiting ephedrine hydrochloride in a water soluble demulcent jelly base for the relief of all nasal congestions, acute and chronic.

Soothes the irritated mucous membranes, promotes ventilation and drainage and makes the patient comfortable.

PROVE TO YOURSELF THE ADVANTAGE OF OUR WATER SOLUBLE JELLY BASE. SEND FOR FREE TUBE TODAY.

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Send me trade size tube EFEDRON free.

M. D.

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"Because of the thoroughness and reliability of its action, and the impossibility of excessive effect, it (Castor Oil) is the purgative of choice for delicate invalids and infants, in pregnancy, and in patients with hemorrhoids or anal fissure."

(Page 53, "Useful Cathartics")

"It is possible so to refine this (castor) oil that, provided it is protected from the influence of the air, it is almost devoid of odor and taste. Such oil is obtainable under the trade name of "KELLOGG'S TASTELESS."

(Page 55, "Useful Cathartics")

DR. BERNARD FANTUS

Eminent Author, Educator and Authority--

Protected from the Influence of Air

Kellogg's Tasteless Castor Oil is the only castor in America that is bottled and sealed at the refinery.

TASTELESS, ODORLESS, NON-ACRID — will not cause after-nausea.

Undisguised by aromatics, benzyl alcohol or other preservatives. Meets all U. S. P. X. requirements.

Insist on your patients getting the original refinery sealed 3 oz. or 7 oz. bottles.



National Distributors

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Everybody's Business

[FROM PAGE 27] the increase in population. In 1909 we had only 76,000,000 people to feed and clothe, or not very many more than half the number that will have to be taken care of in the comparatively near future.

Of our land acreage capable of crop production, only one-fourth is now being utilized. This means that the future is safe so far as an ample supply of food is concerned. Our crop yields per man are high, but judging by what other nations are doing, we have a splendid opportunity to increase the average yield per acre. The American farmer can add greatly to the variety and quality of his product.

Success will come to those farmers who understand that their own salvation is in mechanizing their methods and reorganizing their plans in accordance with the accepted principles of cooperative buying and selling. One farmer today can do what it took a hundred men to accomplish in the old days of hand work. The modern grower of grain can perform in 45 minutes the same job that once required more than 40 hours. The output of the average agricultural worker has increased 50 per cent

in 30 years, and the outlook is for a more rapid increase in individual efficiency in the next ten years, taking the industry as a whole.

Since 1920 both the total acreage and the number of farms in the United States have declined. We have witnessed a decrease in farm dwellers, but an increase in farm power—contributed mostly by machines. Marketing cooperatives have increased in number and importance. There has been an increase in the milk yield, the egg yield, the wool clip and the pounds of meat per animal used or marketed. Diversified farming, crop rotation, scientific drainage, irrigation, seed selection, livestock breeding, soil analysis and fertilization have all contributed to the betterment of agriculture.

Tomorrow offers real opportunities for the wide-awake American farmer. The rapid growth of canning and quick-freezing is opening world markets to many of our producers of foods.

So we need not worry unduly about the future of our major industry, agriculture. It affords a living to more than one-fourth of our people and exercises a purchasing power of close to ten billion dollars annually. Its products constitute nearly half of the value of the exports of the United States, and supply about one-eighth of the tonnage carried by the railroads.

Second only to agriculture is

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is effectively prescribed when symptoms of nervous irritability make their appearance, as in Hysteria—Nervous Indigestion—the Menopause—Convulsions—Insomnia due to mental activity.

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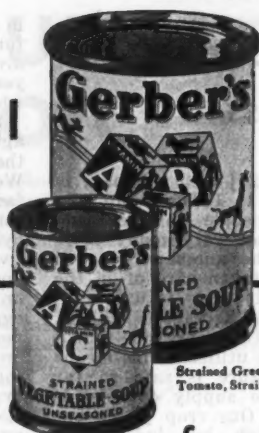
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Special 19
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Strained Peas,
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Strained Green Beans, Strained
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BECAUSE of the repeated indication that a large size can of the Gerber Strained Vegetable Products would be more convenient for institutional diet kitchen use than the regular small size cans produced for the laity—the Gerber Products Division announces the addition of the large size container at this time. Only six of the Gerber Strained Vegetable foods are available in the new large size container. They are — Strained Peas, Strained Spinach, Strained Carrots, Strained Green Beans, Strained Tomato and Strained Vegetable Soup. The large size institutional can contains 19 fluid ounces as contrasted with the 4½ oz. size of the small package, and is specially designed to be of service where a large number of infants are being fed under institutional care, or in hospitals where special diet cases provide a constant demand for specially prepared, unseasoned Gerber Strained Vegetable Products. The special institutional size will not be distributed commercially but will be made available through special arrangement with jobbers wherever the institutional dietitian desires. The six Gerber products specially packed in the 19 oz. cans are packed 12 cans to the case at \$4.00 per case. If the products in this form may be of convenience to you, tear out and mail us today the coupon on this page. Immediate express shipment will be made if you desire.



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Gentlemen: We would be interested in having the 19 oz. institutional size container of the Gerber Products made available to us.

Name _____

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Our jobber is _____

SPECIAL: We would appreciate immediate express shipment of the indicated items at \$4.00 per case.

☐ Strained Peas ☐ Strained Green Beans ☐ Strained Carrots
☐ Strained Tomato ☐ Strained Vegetable Soup ☐ Strained Spinach

the construction industry. Here is another line of business that must expand closely in proportion to the growth of population. Building is tending to become more and more a year-around business instead of one that quits with the first flurry of snow. If there is anything in the idea that people will give up old things for new ones, provided the new things are better and more attractive, then we may be sure that coming radical changes in the designs of homes will increase activity in the building field.

We are coming rapidly to the home that will have one central plant to supply heat, manufacture ice, and wash and cool the air. We may expect to see flat roofs that can be utilized for outdoor living rooms. Windows will serve privacy by having in them glass that will let in the sunshine but not the public gaze. In many houses there will be no basement. Heating systems will be in the garages, which will be attached to the houses. Thinner walls and partitions will save a large amount of space and expense.

There will be dozens of new building materials and more factory assembly of materials. The use of steel construction for small homes offers an opportunity for greatly increasing the consumption of this metal. There will be a growing tendency to have the kitchen and service rooms on the street side and the living rooms at the back of the house. The yard bordering on the street is the last place parents want their children to be in this motor age.

The homes of tomorrow will be run by dynamos. These houses will be filled with mechanical servants that never threaten to quit, never argue, never forget, never want a day off and seldom fail. Such robots will be set to work by automatic switches that obey an alarm clock. Every modern home of average size will

be equipped with 2000 feet or more of wire and pipes with at least 60 outlets for gas and electric attachments. Low-cost houses will be manufactured in parts, so that these parts may be quickly assembled at any point. A crew of men will be able to put such a house together in three or four days.

A movement is now developing toward cooperative apartment buildings that will solve the housing problem in the slum districts of our great cities. Immense structures just finished have already proved that darkness, dirt and squalor are not synonymous with tenement construction. The



TAUROCOL Tablets are prepared in two forms, both of which contain only the purified portion of the natural bile of the bovis family, and its two active salts, the Taurocholate and Glycocholate of soda.

Taurocol Compound Tablets with Digestive Ferments and Nux Vomica.

Samples on request.

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SPOON

FRIGHT



far fetched and foolish though it may seem to you, causes very real anguish to many of your patients. Children and nervous women especially may gag and positively suffer at the mere thought of a whole spoonful of unpleasant Cod Liver Oil.

Your prescription for White's Cod Liver Oil Concentrate is a revelation to these patients—

Just three little wafers—as good as candy—so that for children medicine-time becomes a treat.

And you can rely on their taking White's; getting the full Vitamin A and D potency of high-test oil regularly.

Nervousness and wayward irritability in children is often a definite indication for Cod Liver Oil. When you prescribe White's Cod Liver Oil Concentrate you assure your patient of no less than 250 units Vitamin A and 100 units Vitamin D in each wafer.

Cod Liver Oil Concentrate



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A

poorer classes will have air, sunlight, built-in bathtubs, mechanical refrigeration, self-operating elevators, large rooms, French doors, weather-stripped windows, lighting fixtures in walls, deep cupboards, porcelain sinks, co-operative laundry and milk services, and many other advantages all for an average cost of \$12.50 per room per month. This is no dream, for such ventures are already a successful reality in New York.

Yesterday one of my friends handed me a reprint of an essay by the eminent English writer, Macaulay, who expressed his opinions of business conditions during the depression of 1830. "On what principle is it," he asks, "that when we see nothing but improvement behind us, we are to expect nothing but deterioration before us?"

Macaulay pointed out that notwithstanding all of the evils that have afflicted mankind, including wars and famines, people have created wealth faster than governments and individuals could squander and destroy it. Nations have continued to get closer to perfection in spite of the grossest corruption. Now and then there has been a short retrogression, but the general tendency has continued upward. A single breaker may recede, but the tide still comes in.

In his concluding paragraph, Macaulay said:

"Our rulers will best promote the improvement of the nation by strictly confining themselves to their own legitimate duties—by leaving capital to find its most lucrative course, commodities their fair price, industry and intelligence their natural reward, idleness and folly their natural

punishment — by maintaining peace, by defending property, by diminishing the price of the law, and by observing strict economy in every department of the state."

Pues, Doctorcitol

[FROM PAGE 16] The baby showed approval of this plan when he sighed and went to sleep. The plan also had the further advantage that if the father shivered on his way home, it might perhaps teach him to think on some other occasion.

This inability to think is more noticeable among adults than it is in the case of children. One will repeatedly be impressed with the fact that children seem much brighter than their elders, much quicker to see a problem and to think of a solution.

In one of the coastal towns a steamer from the south was unloading cattle. The method of handling the steers was the cruel one of hoisting them out of the hold of the steamer by the horns. An animal is hauled up, dangling from the derrick by his horns, and then he is swung over the side and lowered to the wharf. In this instance one of the wild steers gave trouble, for he landed on his feet in a panic and started to run. Instead of joining the other cattle, he raced to the end of the wharf, leaped into the water and began to swim out into the bay.

This caused tremendous excitement among the Mexican work-

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DEPENDABLE in all Forms of Specific Urethritis

Literature and Technique on Request

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That good intentions may not go astray

YOUR patients always promise to obey orders, of course. And yet how often their good intentions fail both them—and you!

For instance, when you prescribe cod-liver oil, you know that your patients need it. They should take it. But they hate it. They hate the taste. Before long their good intentions and the bottle are both forgotten.

Here's a way to help them remember! The next time you find it necessary to prescribe cod-liver oil, suggest the pleasant *emulsified* form—Scott's Emulsion. Scott's Emulsion is made of purest Norwegian cod-liver oil of verified vitamin potency. Scott's Emulsion also contains calcium salts. And because it has an agreeable taste, patients take it and keep on taking it! It keeps good intentions good!



Professional samples gratis!
Write on professional stationery to
Scott & Bowne, Bloomfield, N. J.

SCOTT'S EMULSION
OF
VITAMIN-RICH **COD-LIVER OIL**

Pleasanter to take—Easier to digest

ers; there were shouts and cries and running about, but no one knew what to do. Then a little boy made a suggestion:

"Get a boat and follow him and lead him back with a rope."

To be sure! *Ya se ve!* Now they could see what to do. With a definite plan on which to focus their thoughts they worked with a will, and the animal was soon brought back to the shore. But until the small boy had spoken, no one seemed able to think of any way of meeting the emergency.

An impressive sight was a gang at work at one of the mines. The "boss" of this gang was a little boy of perhaps eight years of age. His "gang" consisted of one man, a huge peon who followed the boy's orders with the docility one would expect of an ox.

"Come here; pick up that; carry it over there; now put it down on top of that; *andale!*" That is the way the work of this gang was carried on day after day. The boy supplied whatever intelligence was required, while the man furnished the muscle.

Another characteristic of the peon is his love for "his tierra." By "his land" he does not mean Mexico, nor even the state in which he lives. He means the particular locality where he was born; that to him represents home, and when he is sick he has an intense desire to return to it.

In one of the cuevos there was a man who had pneumonia. When told the nature of the illness, it was with the greatest difficulty that his brother was dissuaded from taking the sick man on his back and starting off on an eight-day journey across the mountains. Their only object in going was the patient's wish to die in his tierra. It required much insistent argument to make them believe that it was better for the sick man to remain where he was and get well, than to die on the

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Rustless Steel Surgical Instruments

All of which are made from
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NO PLATING

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HART'S INHALANT

"With the water soluble vegetable fluid base"



Relieves nasal congestion quickly and pleasantly. The water soluble vegetable fluid base provides quick initiation and prolonged duration of Ephedrine action with minimum irritation. Soothes the inflamed mucous membranes, promotes ventilation and drainage and helps to make the patient comfortable.

Prove to yourself the advantage of
EFEMIST HART'S INHALANT
Send for your free bottle today.

HART DRUG CORP.

12 N. E. Third St., Miami, Fla.

Please send me free bottle of
EFEMIST.

M. D.



Please accept,
DOCTOR

in behalf of
your wife...

This FREE bottle of
HIRES EXTRACT

enough to make 40 bottles of

Hires Root Beer

Let your family try it

Frankly, we find the remarkable increase in the popularity of Hires Root Beer due to sampling.

Most people who try Hires Root Beer, become our steady customers.

We would like to win your friendship.

I'd like to send your wife a free, full size bottle of Hires Extract.

I'd like your family's judgment, after trying the 40 bottles.

The taste you'll find appealing; Hires Root Beer has a distinctive flavor all its own. It contains the percolated juices of roots, herbs, barks and berries. It is utterly pure—free from habit-forming drugs, artificial color and flavor.

Then there is a third merit—

economy. Hires Root Beer costs but 1½ cents a bottle compared to the usual prices of bottled beverages—a saving of 90% at least.

If you'll mail the coupon below, I'll send the free bottle. Kindly give home rather than office address.

C. E. Hires, Jr.

CHARLES E. HIRES, JR. President
The Charles E. Hires Company,
Philadelphia, Pa.

The Charles E. Hires Company,
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Philadelphia, Pa.

33-3

Kindly send free bottle of Hires
Extract.

Name

Street

City State



road. He finally consented to stay, and did recover.

The doctor will sometimes be surprised to see how much of an oracle he seems to these people, and how unimaginative they are in obeying orders. "Literal" is a feeble word to express their way of following instructions. One man had been given some tablets which he was to take at definite intervals. When asked why he failed to take the medicine, he replied: "You did not tell me whether to chew them up or swallow them whole."

The peons have the utmost affection for their children and will do for them anything within their power. But the same lack of imagination sometimes gives their kindness a peculiar twist. One mother brought her very small baby to the doctor because it could not sleep. What child specialist in the United States would have inquired about the use of coffee? But, knowing the peons, this question was asked.

"Oh, yes," replied the mother, "the baby drinks three cups of coffee a day."

When questioned she admitted that she herself drank only two cups. I protested that it was unreasonable to give the baby more coffee than the mother used, hoping that such an argument would help her to decide other questions in the future. But to her there was nothing unreasonable about the matter, for she answered:

"Pues, doctorcito, the baby likes it."

In making trips to the cuevos and jacales of the workers, it was customary to carry a revolver. That, however, was more of an ornament than a protection, for one hesitated to use it even when it seemed necessary.

In the villages scattered about the mine there were bands of starved, wolf-like dogs which had no love for a Yankee and would undoubtedly kill a white man if they had the chance. But other Americans had cautioned me not to shoot one of these dogs.

"At least," they warned me, "if you ever do shoot one, beat it at once to the judge and tell him about it before the peons can make a complaint. If they get there first, you'll be in serious trouble."

It was fortunate that there were other means of defense, so that I never had to use the gun. There might be four or five of these savage dogs racing toward me, evidently meaning business. At first sight of the wolfish band I began picking up as many good-sized stones as my hands could hold, taking care to be on my feet again before the dogs had come too close. No one had to tell me to "fire when you are ready, Gridley." As soon as the enemy was within range the barrage began, and it took real marksmanship to stop them.

If any baseball pitcher wishes to improve his control, let him practice throwing stones under such conditions. The half-wild dogs that are racing toward him

The Peculiar Property

of increasing the defensive forces of the body,
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has induced many exacting clinicians to employ it in
systemic infections, typhoid fever, for instance.

Try it in your cases of systemic infections
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FREE to Physicians

Use the coupon below. It will bring you a trial can of Cocomalt without cost.



When convalescents demur at the monotony of milk

*Cocomalt not only renders it more palatable,
but increases the food value over 70%*

COCOMALT is a balanced combination of milk protein, milk minerals, converted cocoa, sugar, malt and eggs—to be added to milk, hot or cold. So mixed, the result is a delicious, chocolate flavor food drink—high in nutritive value and extremely palatable to convalescents, children and invalids.

Cocomalt contains Vitamin A and also Vitamin B complex. Moreover, it contains Vitamin D in sufficient quantity to make a definite contribution

to the antirachitic potency of the child's diet.

Cocomalt is packed in air-tight tin containers. At grocery and drug stores. $\frac{3}{8}$ lb., 1 lb., and 5 lb. hospital can.

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DELICIOUS HOT OR COLD



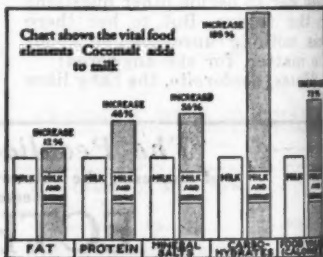
R. B. DAVIS CO., Dept. HH 2, Hoboken, N. J.
Please send me, without charge, a trial can of Cocomalt.

Name _____

Address _____

City _____

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will tear pieces out of his hide if they can only get close enough. Every shot has to count; they must be delivered as fast as one can throw and with force enough to knock a dog off his feet. The thrower feels instinctively that there is an incentive for him to do his best.

The fact that it was never necessary to use the gun speaks for the results of my drum-fire. Many times my artillery marched off the field with one or two of the enemy stretched on the ground and the rest in full retreat. After a battle of this sort it was not necessary to "beat it to the judge." The casualties would recover in a short time, although they would probably limp for a few days. After that, one dared to hope, they might be a little more cautious about again attacking a gringo.

This plan of talking to the judge first seems to be a very important one. The idea was forced upon me in regard to my taxes. My license to practice medicine was all in order, but no one had told me that there were fees connected with the privilege. One day the timekeeper at the mine inquired about this, and when he learned that the tax had not been paid, it was considered a matter of some gravity. The officials of the company sent him with me to talk to the judge.

It required much talk, much pleading of ignorance on my part, and persuasive argument by my friend the timekeeper, before the matter was settled. We had to make out a solemn apology, written on official stationery, with the proper number of revenue stamps attached, before they would even consider leniency. Then they sentenced me to pay a multa—a fine—of just the amount that my taxes would have been. And so the matter was amicably adjusted, but it might easily have been much more troublesome.

It was necessary to ride over the mountains at regular inter-

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A most common ailment which is a usual symptom of Cystitis. Here particularly you will find CYSTOGEN a valuable prescription.

CYSTOGEN rids the system of toxins and waste products and circulates an antiseptic substance throughout the body.

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Please send literature and samples of CYSTOGEN.

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M.E. 2-31

New facts about KLEENEX every doctor should know

Announcing results of bacteriological tests on handkerchiefs used during colds—of utmost significance to every physician

PROFESSIONAL men recognize —far beyond the comprehension of the layman—the significance of the common cold which causes more industrial loss than any other ailment...and is a contributing cause to far more serious secondary diseases.

You, then, know the value of Kleenex — the disposable tissue handkerchief.

You know the advisability of discarding a handkerchief —which, used during colds, may contain as high as 940,000 germs of the types associated with colds!

Almost 3,000 eye, ear, nose and throat specialists have asked for samples of Kleenex. Kleenex is used today in the practice of hundreds of reputable physicians, who are urging patients to use this safer handkerchief.

May we send you a sample package of Kleenex, specially packaged for professional men? The coupon will bring it.

BERTRAM FEUER, M.S. Ph.D.
ASSOCIATES
BACTERIOLOGISTS AND CHEMISTS
200 N. LAKE STREET
CHICAGO, ILLINOIS

Kleenex Company,
Lake Michigan Building,
Chicago, Illinois.

December 18, 1937

Re: Lab. No. 1004-15

The experimental work so far completed can briefly be summarized as follows:

1. Handkerchiefs used by persons having 'colds' were cultured and estimated to contain as many as 940,000 bacteria per handkerchief. The types of organisms identified and included in these examinations are the *Haemophilus influenzae*, *Streptococcus pneumoniae*, and *Micrococcus catarrhalis* and *Staphylococcus aureus*.
2. Organisms, representative of those known to be associated with 'colds' when impregnated upon linen and rinsed in boiling water and/or soap water followed by clear water, were found not to be killed nor appreciably inhibited from growing.

The above findings corroborate the usual public health ideas regarding the possible spread of infections from nasal secretions. The stand that such mucous secretions should be destroyed by being caught in easily destructible pieces of paper or cloth is well taken, regardless of the fact that the etiological agent of the common cold may be a micro-organism or a filterable virus.

Very truly yours,
[Signature]

Dr. Feuer, who supervised bacteriological experimental work on Kleenex, was formerly with Northwestern University Medical School.

Kleenex Company
Lake Michigan Building, Chicago, Ill.

Please send me a package of Kleenex for professional use. (Print name plainly.)

Dr. _____

Address _____

City _____ State _____

vals to pay this tax, and one of these trips made an impression which will not soon be forgotten. My way led by a long upward trail over a divide where there were several cairns of rock bearing crosses. They marked the resting places of people who had been killed by bandits at this point in the trail, a fact which made one watch the road ahead with considerable interest.

From the summit of the ridge, leagues of semi-desert lay spread out like a map. Mountain ridges sprawled across it like fingers of an out-stretched hand. The distance was buried in heat haze, but nearer objects stood out sharply in the dry, clear air. On the opposite side of the valley which seemed to lie at one's feet, was another out-stretched finger of mountain ridge, dry and rocky and dotted with scattered palms and cactus. The floor of the valley between the ridges seemed equally dry and bare, but it was composed of soil that needed only the blessing of water to make it bloom as a garden.

The trail led from the ridge by a long gradual descent into the valley, and then there was a monotonous ride across the flat plain to the town. The sun was hot in the valley, and while my mule plodded along at a walk, I nodded in the saddle. Suddenly the mule stumbled; in spite of a tradition to the contrary, even mules do stumble sometimes. Perhaps he too was feeling sleepy. The jerk threw me forward in

the saddle and my hand chanced to touch his neck.

It happened that this particular mule had one obsession; nothing must touch his neck. While I still leaned forward in the saddle, he threw back his head and struck me a stunning blow in the face.

With envious thought of the shock-absorbing helmet worn by knights of old, I slid from the saddle and sat upon the ground, waiting for the mountains to stop going around in circles and ellipses. The mule, fortunately, was patient. He waited while nature went through these convolutions, and then we continued our journey.

Aside from bandits there was nothing to fear from the people one met, unless they should happen to be drunk. If they had been drinking the villainous *tequila*, one could not be quite so sure. But there were very few occasions when a stranger did not receive the most friendly and courteous treatment. Ordinarily the peon takes off his hat when he meets a doctor, just as he would do to his Padre of the Church.

On one of the exceptional occasions I stood in front of my quarters while a drunken laborer raved in the road in front. He shook his fist at me and shouted: "*Mata á los gringos; kill the Yankees.*" But there was nothing to fear, for his wife had him by the collar, leading him home.

It is not always easy to under-

With the many thousands of cases of

TUBERCULOSIS

home treatment is absolutely necessary and prominent Physicians agree that we have no medicinal remedy equal to creosote.

Mistura Creosote Comp.

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Meets all the requirements of the creosote treatment. It is a palatable preparation and does not disturb the most sensitive stomach.

Sample and Literature on request.

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Unguentine Rectal Cones



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CONE CONTAINS

Alum Compound (non irritating) 3 grs.
Ergotin 1 gr.
Ammonium Sulphoethylosate . . . 1/4 gr.
Ext. Belladonna 1/4 gr.
Phenol
Mentholated Cocoa Base

Produced in the Laboratories of
THE NORWICH PHARMACAL CO.
Norwich, New York

THERE is satisfaction in giving satisfaction. UNGUENTINE RECTAL CONES have been used by the medical profession for years for the effective treatment of hemorrhoids. This record merits careful consideration when you prescribe a remedial agent for this condition.

Write to the Medical Department for a professional package gratis.

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A Requisite in the
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stand just what takes place in the mind of a Mexican peon. Their standards of conduct are unlike ours, and they look at things from a different angle, in their own peculiar way.

One young man who came for treatment said that he had been serving under one of the notorious bandit chieftains. I expressed my fear that business in his line would not continue to be good, because it seemed that a time was rapidly approaching when no one would be left who would have any valuables worth taking. A change came over his face as he assured me that my fears were unfounded. With a happy, child-like smile, he declared his confidence in the future of his career:

"You are mistaken, Señor; there will always be somebody to rob."

A company of soldiers was recruited from a nearby town, quickly enrolled in the army, and taken into battle. Because they refused to fight, they were brought back to their homes and the matter investigated. When questioned about their lack of valor, they explained:

"Si, Señor, we are volunteers; but we volunteered for a dollar and a half a day, not to be shot at."

One of our principal amusements at the mine was reading the accounts of battles when newspapers reached us. Some of the correspondents may have tinged their descriptions of conflict with patriotic fervor, but their naivete was often refreshing. They usually began by mentioning the valor of the troops, who seemed, according to the correspondents, to be always outnumbered by the enemy. The severity of the fighting would be indicated by the number of shots that were fired, and at the end would be mentioned the losses. A typical paragraph would read something like this:

"Our soldiers fought the enemy with greatest bravery. Eight

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thousand shots were fired. A burro was killed."

The explanation of the discrepancy is that the average peon soldier has no conception of how far a rifle bullet will carry. As soon as the enemy is sighted the firing will probably begin, with the negligible result which might be expected.

One correspondent had a story about a mysterious weapon which one of the armies proposed to use. It was some sort of a pneumatic gun which would throw a stick of dynamite among the enemy's troops. The account read:

"This gun will throw a stick of dynamite to the distance of a mile. It is expected to do great execution, if we ever get near enough to the enemy."

Perhaps it was on account of the periodical trips to pay taxes, that a certain portion of my wardrobe began to show distinct signs of wear. As there were no stores at the mine, it became necessary to go to one of the tailors in the town across the mountains. At the *tienda* I purchased the cloth which he ordered, and then asked when the garment would be ready for me.

"In an hour and a half, Señor," he replied.

That seemed unreasonable, especially when one remembered the speed at which such fellows usually worked. Could there be something wrong with my Spanish? Several times the question

was repeated, using different forms of expression, but the answer always the same:

"In an hour and a half, Señor."

Finally the matter seemed hopeless, so I gave up the attempt to understand him and returned to the mine. After waiting ten days, another trip was made over the mountains trail to call on the tailor. Again I found him idling in front of his shop, and again he answered in reply to my question:

"In an hour and a half, Señor."

If he thought that this was a joke, it had surely gone far enough. I demanded that he give me either the cloth or the garment. He stepped into the shop and brought me a pair of riding breeches of diminutive size. Perhaps a five year old boy could have worn them, but even that is doubtful.

The incident was explained later. Whether it was my Spanish pronunciation that had unbalanced him, or because he actually had some work to do, the tailor had become violently insane as soon as he received the goods from me. He had been locked up in the jail during the ten days of my absence and had been released just before my second visit. He was no longer violent, but seemed still to have the hour-and-a-half complex.

On leaving the mine I met an American on the train who offered me another position. His company was engaged in the

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manufacture of rubber from the desert plant, Guayule, and controlled an enormous tract of desert land where this plant grew wild. Because the growth was sparse and scattered, the gathering of the guayule shrub employed a large number of laborers, who lived in villages scattered about the arid plain. The manager proposed that I should travel about the estate with mules and a buckboard wagon, visiting the villages and looking after the health of the workers.

As we talked he described the telephone system which had been installed by the company, connecting the different villages; central was at their main office, and here one could listen-in to conversations over the wire. The rancho was so large that it often contained bands of soldiers representing both factions. Sometimes an officer of one of these "armies" would call up over the telephone and talk to an officer of the opposing side. They would exchange compliments and agree to meet for a battle at a certain point. Then they would hang up the telephone receivers and both forces would go in opposite directions. For some strange reason they never seemed to meet.

I listened to his story and began to think. Suppose one of these armies should happen to meet me on my buckboard, out there in the middle of the desert. I bore no ill will toward either army, and had no wish to injure any of them. But did they know it? And did they feel as kindly toward me?

And then another thought demanded attention. Suppose one of these armies happened to have that dynamite-throwing gun which would shoot a mile. My buckboard, moving across the plain, might seem to them a convenient mark to try out its range. If such a barrage should begin, where would one find a shell hole?

No, there are times when even adventure becomes monotonous. I had to decline the offer!

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Suggestions to a New Secretary

[FROM PAGE 23] nary clothing before going out after treatments.

16. Watch young children; they are destructive animals and may injure valuable property—or themselves—if allowed a moment's freedom.

17. See that all windows are closed, doors latched and sterilizer and lights off before leaving the office.

18. Be economical—save on telephone calls, stamps, stationery, and supplies whenever possible.

19. Please use telephone for personal calls, both incoming and outgoing, as little as possible.

20. Do any personal reading or hand letter-writing in one of the inner rooms; the outer room must always appear business-like.

21. No smoking or gum-chew-

ing is permitted when patients are in the office or are expected.

22. Keep all working materials clean, in place, and in working order (sterile when necessary). This applies to instruments, furniture, writing materials, etc.

23. Inspect medical bag at regular intervals—daily is too often. See that there is sufficient supply of application tongue depressors, alcohol sponges and dressings; and at least a good culture tube; that medicine containers are not empty, and that record blanks and other necessary forms are provided at all times.

24. Always have in mind the dignity of your work; develop an attitude toward it in which you desire to help your employer succeed and to assure his patients comfort and safety becomes more important than a few minutes overtime. Remember all you have ever heard or read about this work, and devote yourself to your job.

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